

HOW TO APPLY

Micro Grant

The following directions are organized by application tabs in the order that they are displayed. For more information about the SHF program and grant details, take a look at our [Application Guide](#).

ORGANIZATION & CONTACT INFORMATION

- Please provide contact information for the applicant organization and an individual with signing authority for the organization.
- Be prepared--have the applicant organization's Federal Tax ID number ready.
- Please provide the requested information regarding your organization's diversity, equity, and inclusion work.
- Check the box if this is your organization's first time applying for an SHF grant. Please reach out to our staff if you are unsure.
- Please provide contact information for the Grant Recipient Contact; this will be the primary point of contact for the project.



PROJECT & PROPERTY INFORMATION

- Provide the property owner's information.
- Enter the geographic information for the property's location. (Not the applicant's or owner's address, if different)
- Select the State Senate, State House, and United States Representative Districts for the property.

*In 2021, new Colorado state legislative districts were drawn. Your district may have changed; please verify.

- Enter the address and legal description of the property.



DIVERSITY, EQUITY & INCLUSION

The State Historical Fund is committed to diversity, equity, and inclusion rooted in History Colorado's Anti-racism [Grounding Virtues](#). One of our goals is to seek racial equity within our funding by providing grants that clearly benefit Black, Indigenous, and People of Color (BIPOC) communities.

Provide information regarding how this project will significantly benefit/involve the BIPOC community, along with two letters of support.

If your current project is not serving a BIPOC community, please leave this section blank and proceed to the Project Team section.

- Which communities will primarily benefit?
- How will BIPOC communities benefit from this project?
- Did they BIPOC community take part in bringing the project together? If so, how?
- Will BIPOC communities be involved during the project? If so, how?
- Are there BIPOC partnerships?

PROJECT TEAM

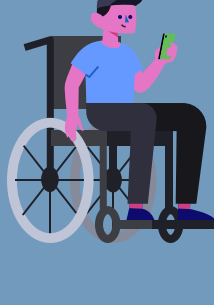
750 Words or Less

Briefly describe similar projects or grants the applicant has completed or managed.

List your project team members including any additional consultants/engineers and provide:

- Each person's role and responsibilities for this project.
- Their qualifications that are applicable to this project.
- Any experience with historic preservation, and/or grant finance and management, etc.

Please include resumes as a separate attachment.



RESOURCE DESCRIPTION & SIGNIFICANCE

500 Words or Less

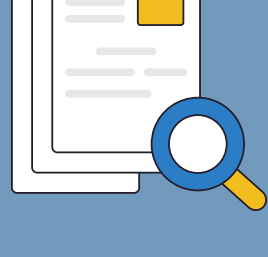
- Select the levels of designation that apply to the resource. If the resource is not designated please include a copy of the Preliminary Property Evaluation form (#1419) in your attachments.
- If the resource is not designated, please describe what steps are being taken to achieve designation.
- Indicate if the designation includes the building footprint only, the building and surrounding property, or if the building is contributing to a historic district. If you are unsure of the designation boundary, please contact State Historical Fund Staff at 303-866-2825.
 - NOTE: The State Historical Fund cannot fund work outside of the designation boundary.
- Provide the resource's historic name (located on designation paperwork).
- List the Smithsonian site number for your resource. If unknown, contact the Office of Archaeology and Historic Preservation at 303-866-3392. If this does not apply to your project, please enter N/A.
- Provide period(s) of significance as listed in the historic designation. If not included or this does not apply, enter N/A.
- Provide a description of the resource and its significance.

SCOPE OF WORK & BUDGET

The Micro grant can fund any work that could also be funded by a competitive grant but is not covered by another non-competitive grant type.

Applicants may only apply for the same scope of work for 2 consecutive years before being required to take a break from applying. For example: If a micro grant is awarded to fund a local conference 2 consecutive years, then the applicant would need to wait before reapplying.

- This is a fillable form.
- Align the costs with the associated Task.
- Do NOT include decimal points, commas, or dollar signs - only use whole numbers.
- The budget should be supported by the project description, bids, and/or proposals.
- Press the calculator at the bottom and all of the totals will be calculated.
- There is maximum grant request of \$5,000 and a minimum of 50% of the project total as cash match required for this grant.
 - For BIPOC requests the cash match is 25% - an attached letter of support is required from the participating community.
 - If your organization is unable to provide the full match required, please provide a justification in the box.



PROJECT DESCRIPTION

1500 Words or Less

Provide a complete description for what will be accomplished, why it is needed, how to project will benefit the community, and how the project results will be used in the future.

- What will be accomplished, how and by whom?
- Is your community or organization facing challenges?
- How will the public be made aware of the project and benefit from it?
- How does the community support this project?



PROJECT TIMELINE

Read each line and check each box to confirm that you understand the following statements regarding the project timeline:

- I understand that if awarded, it can take up to 6 weeks to execute the grant agreement with the State Historical Fund.
- I understand that the SHF agreement period is 24 months and this project will be completed within that time period.
- I understand that SHF has 30 calendar days to complete review of the deliverables (products) that will be required with this project and I have accounted for the 30 day reviews within the 24 month agreement period.
- I understand that weather may delay completion of some projects and I have accounted for possible delays within the 24 month agreement period.



AGREEMENT

Read the State Historical Fund grant list of conditions. Check the box if you understand and agree to the conditions.

ATTACHMENTS



Signed signature page. This may include the Applicant Organization, the Owner (if different), and a local official if private property.



[Colorado State Substitute W9](#)



Photographs Include both historic and current - overall photos as well as details of specific problems.



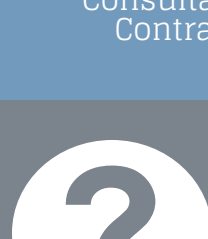
Consultant Proposal/ Contractor Bid(s)



Resume(s) for primary project participants



Map of the resource site.



Our Outreach Team is happy to help, contact us at

303-866- 2825 or hc_shf@state.co.us