GRANT APPLICATION COVERSHEET

___ 1. Applicant has provided its DUNS number. A DUNS number is required to apply for an MHC grant. If you are unsure of your number, visit http://fedgov.dnb.com/webform for more information.

___ 2. MHC’s Assistant Director or Executive Director was consulted regarding project viability. With whom did you consult? ________________

___ 3. Application is fully completed. Responses are limited to the space provided.

___ 4. Project narrative is attached to grant application.

___ 5. Applicant is a nonprofit organization.

___ 6. All program participants have been contacted and have agreed to participate.

___ 7. Signed resume sheets are included for all program participants who will be paid with grant funds.

___ 8. A budget narrative, specifically listing all anticipated expenses as well as persons to be paid and reasons for the payment, is included along with completed budget form.

___ 9. Proposed program or event will take place at least 6 weeks after the minigrant deadline, or 10 weeks after the major grant deadline.

___ 10. No honorarium has been requested for an employee of applicant organization.

___ 11. Fiscal Agent has agreed to be responsible for managing grant funds and project expenses for the duration of the grant period and preparing financial reports.

___ 12. Project Director and Fiscal Agent are not the same person.

___ 13. All grant forms are signed where required.

___ 14. Applying organization is registered on the System for Award Management site, SAM.gov.

_____________________________________                ______________________________
Signature of Authorizing Official                                     Date
CHECK ONE:

____ Minigrant (request up to $2000)

_____ Major grant (request between $2001-$7500)

<table>
<thead>
<tr>
<th>Mississippi Humanities Council</th>
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</thead>
<tbody>
<tr>
<td>Grant Application Form</td>
</tr>
</tbody>
</table>

1. **Title of Project**

2. **Name and address of applicant (organization)**

3. **MHC funds requested**

   $2,000 Maximum for Minigrants
   $7500 Maximum for Major Grants

4. **Project Director**
   a. Name and Mailing Address
   b. Title/Position
   c. Telephone (Include Area Code and Extension)
   d. Email

5. **Fiscal Agent**
   a. Name and Mailing Address (Project Director cannot serve as Fiscal Agent)
   b. Title/Position
   c. Telephone (Include Area Code and Extension)
   d. Email

6. **Proposed Grant Period**
   From: 
   To: 

7. **Program Date(s) and Time(s) (if applicable)**

8. **Program Location(s) (if applicable; if web-based, give web address)**

9. **Estimated number of persons served by project**

10. **Congressional District of Program** (circle all that apply)

11. **Brief description of proposed project** (do not exceed space provided)
PROJECT SUMMARY

Please limit your response to the space provided. As specified in the grant application guidelines, the narrative attached to this application form should describe further details of the proposed project activities.

A. Humanities Content. Why is this a humanities project? Explain which disciplines are central to the project.

B. Personnel. List persons involved in the planning and implementation of the project and briefly describe their qualifications and roles. Attach a completed and signed MHC Resume Sheet for each person who will be paid with MHC grant funds.

<table>
<thead>
<tr>
<th>Name</th>
<th>Institution</th>
<th>Humanities Discipline</th>
<th>Role in Project</th>
</tr>
</thead>
</table>

C. Audience. (Projects that do not have an audience, such as planning grants, need not complete this section.) Who is the target audience? How will you reach them? Describe project publicity plans.
D. Evaluation. Describe the evaluation plan for assessing how well the project achieved its objectives.

E. Project Narrative. Please attach. See Grant Guidelines for instructions on how to write project narrative.
BUDGET

A budget narrative/explanation should be attached with sufficient detail to demonstrate that the costs are reasonable and directly related to the plan of activities for the project. Scholars and others who will be paid and amounts for each should be listed individually. Expenses for salaries, wages, and fringe benefits should be shown as matching funds; MHC funds may not be requested in these categories.

EXPENSES

<table>
<thead>
<tr>
<th>Item</th>
<th>MHC Grant Request</th>
<th>Cost Share</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salaries and Wages</td>
<td>XXXXX</td>
<td>Cash from applicant</td>
<td></td>
</tr>
<tr>
<td>Fringe Benefits</td>
<td>XXXXX</td>
<td>In-kind</td>
<td></td>
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<tr>
<td>Honoraria</td>
<td></td>
<td>Cash other sources</td>
<td></td>
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<td>Travel</td>
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<tr>
<td>Supplies</td>
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<tr>
<td>Printing and Duplicating</td>
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<tr>
<td>Postage and Telephone</td>
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<tr>
<td>Equipment Rental</td>
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<tr>
<td>Facilities Rental</td>
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<tr>
<td>Advertising</td>
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<tr>
<td>Other (specify)</td>
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<td></td>
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<tr>
<td>TOTALS</td>
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CERTIFICATIONS*

The applicant certifies that the conduct of this program will be in compliance with the provisions set forth by the National Foundation on the Arts and Humanities Act of 1965 (as amended) and the policies of the Mississippi Humanities Council.

1. Certification Regarding the Nondiscrimination Statutes.
   The applicant certifies that it will comply with the following nondiscrimination statutes and their pending regulations:
   (a) Title VI of the Civil Rights Act of 1964 (442 U.S.C. 200d et seq.), which provides that no person in the United States shall, on the ground of race, color or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the applicant received federal financial assistance. Title VI also extends protection to persons with limited English proficiency.
   (b) Section 504 of the Rehabilitation Act of 1973, (29 U.S.C. 794), which prohibits discrimination on the basis of disability in programs and activities receiving federal financial assistance;
   (c) Title IX of the Education Amendments of 1972 (20 U.S.C. 1681 et seq.) which prohibits discrimination on the basis of sex in programs and activities receiving federal financial assistance; and
   (d) The Age Discrimination Act of 1975 (42 U.S.C.6101 et seq.), which prohibits discrimination on the basis of age in programs and activities receiving federal financial assistance.
   (f) Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion – Lower Tier Covered Transactions (45 CFR 1169)
   (g) The prospective lower tier participant (applicant) certifies, by submission of this application for a grant, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.
   (h) The prospective lower tier participant (applicant) is unable to certify to any of the statements in the certification, such prospective participant will attach an explanation to this application for a grant.

NAME OF AUTHORIZING OFFICIAL (please print)________________________________________
TITLE _______________________________________________________________________
ADDRESS ____________________________________________________________________
EMAIL _________________________________________________________________
PHONE: Office (   ) ___________________ HOME (   ) ______________________________
SIGNATURE _______________________________________________________________
MHC Grant Application Resume Sheet

The Project Director and all humanities scholars to be paid honoraria from MHC funds must complete and sign this form. This page may be photocopied as many times as necessary. Each person’s Resume Sheet should be as detailed as possible and supply specific information describing his or her role in the project, as well as providing background information on qualifications. Resume attachments are limited to two (2) pages per person.

**Personal Information**
Name:
Title:
Mailing Address:
Home Telephone: Work Telephone:
Email address:

**Professional Information**
Education/Degrees:
Area(s) of Expertise (as they relate to this project):
Current Position:

**Pertinent Publications or Activities**

**Project Participation**
Please describe how your expertise will be applied to the proposed project and outline your role.

**Signature**: (digital acceptable)

_________________________________________  ______________________
Participant                      Date