



**MINI-GRANT APPLICATION**  
**Applications are reviewed monthly and are due by the 30th of the month.**

**APPLICANT INFORMATION**

Applicant Organization Name:

Address:

Phone Number:

Project Title:

Contact Person:

Contact Person's Email Address:

Please provide a brief description of your organization/group/club:

**EVENT GOAL**

**Example**

List the broad goal(s) of the proposed event:

**EVENT DESCRIPTION**

**Example**

Briefly describe what you will do with the mini-grant funds to support the COVID-19 vaccination outreach and education. Please include information about reaching Black communities, ethnic communities and other communities of color.

## EVENT OBJECTIVES

Check all that apply: **Must select at least one\***

Provide education about the COVID-19 vaccine (materials provided by Detroit Equity Coalition on COVID-19; available in English, Spanish and Arabic).

Play an educational video (provided by Detroit Equity Coalition on COVID-19) on COVID-19 (in-person or remotely) at the event.

Host a mobile vaccination clinic.

Provide a list of vaccination sites available in the six to eight weeks following your event, with hours, locations and other pertinent information.

Distribute and collect pre- and post-surveys if in-person event (must check this for in-person event).

Maintain a sign-in sheet of attendees and submit back to Detroit Equity Coalition on COVID-19 (must check this for in-person event).

Have a representative at the table as a key partner of the coalition (monthly meetings via Zoom through August 2022)

Other (please explain).

## EVENT PROMOTION

Example

Describe how your organization/group will promote the event:

ZIP CODES - Check all zip codes the project will reach: **Must select at least one\***

DETROIT:

- 48219
- 48223
- 48227
- 48228
- 48235
- 48209
- 48217
- 48222
- 48229

REDFORD:

- 48239
- 48240

DEARBORN:

- 48120
- 48216
- 48238
- 48204
- 48206
- 48212

WARREN:

- 48093
- OTHER:

Please list

REACH

How many people do you expect to reach with this event:

Explain how you determined this number.

Example

PROJECT ACTION PLAN

Example

MONTH	ACTIVITIES TO TAKE PLACE

**PROJECT EVALUATION AND MAINTENANCE**

Check all that apply: **Must select at least the first two options (Unless not an in-person event)\***

Maintain sign in sheets for all attendees to monitor number of attendees; return to Judson Center following event.

Distribute pre- and post-surveys to all attendees; this may require dedicated entrance and exit stations at your event.

Other (please describe)

**OTHER INFORMATION (optional)**

Share any other pertinent information about your event that has been shared above.

**BUDGET**

Example

**Grant range \$500 to \$1,500**

Note: \$500 grants must agree to have a minimum of 25 attendees; \$1,500 grants must agree to have a minimum of 75 attendees; grant amounts in between should reflect accordingly.

EXPENSE ITEM	AMOUNT	DESCRIPTION
Personnel or Stipends	\$	
Operating Expenses	\$	
Supplies	\$	
Contractual Services or Rentals	\$	
Other Expenses	\$	
Budget Total	\$	

**Detroit Equity Coalition on COVID-19 will work with awardees to furnish food/beverages at the event.** Please describe what you envision to include at your event and the approximate cost to the coalition.

Example

