



Sauk County, Wisconsin
The "Good Idea" Grant
UW Extension, Arts & Culture Committee
West Square Building, 505 Broadway, Baraboo, WI 53913
Phone: (608) 355-3250 Fax: (608) 355-3550

Applicant:

Applicant Mailing Address:

(Street)

(City)

(Zip)

Contact Person:

(Name, if different from applicant)

Applicant Email:

Work Telephone:

Home Telephone:

FAX:

Applicant Status:

- ☐ 501(c)(3) not-for profit organization.
- ☐ tax exempt unit of local government (includes school districts).
- ☐ other IRS recognized not-for-profit organization.
- ☐ individual (*attach a resume detailing area of expertise or credentials and a letter of support from an organization or individual*).

Describe the Applicant:

(In the space provided, please provide a concise summary of yourself or organization).

Amount Requested:

(Maximum allowable amount is \$500)

Describe Project Budget:

In the space provided, please provide a concise summary of the proposed project budget, including any revenues, expenditures and in-kind contributions.

Revenues: Other grants, donations, sales or admissions received

Expenditures: Cost associated with the project

In-Kind: Donations other than cash

Ideally, your organization's revenues plus in-kind should equal your organization's expenditures plus in-kind.

The undersigned hereby certifies and affirms that:

1. They are an authorized representative of the applicant organization;
2. This application has received the approval of the applicant organization's governing board or chief administrative official;
3. The information contained in this application and its attachments is true and correct to the best of his/her knowledge.

Applicant or Authorized Official:

Title:

Date:

Signature:

Project Narrative:

*Provide a detailed description of the project and **be specific. Indicate what will be done, why it is a good thing to do, who will be responsible for doing it, and who will be the major benefactors.***