

CERTIFIED HISTORICAL INSTITUTIONS

PLEASE DOWNLOAD THE APPLICATION PDF TO YOUR COMPUTER AND SAVE AS A NEW FILE TO COMPLETE THE FILLABLE FORM.



2023-24 SMALL GRANT APPLICATION

PLEASE SPECIFY

Tier 1 Grant Application (\$2,000 maximum)

Tier 2 Grant Application (\$1,000 maximum)

Name of Organization _____

Mailing Address _____

City _____ ZIP Code _____

Physical Address of Museum _____

City _____ ZIP Code _____ County _____

Phone _____ Email _____

Project Contact Person _____

Contact Phone _____ Contact Email _____

GRANTS MAY BE USED TO FUND:

- ❖ Public programming (virtual or in-person)
- ❖ Improvement or expansion of exhibits

- ❖ Collections management/ artifact and archival storage improvements
- ❖ Preservation of artifacts or documents

- ❖ Audio and/or video recording of oral histories
- ❖ Educational materials
- ❖ Equipment to facilitate audience engagement

GRANTS MAY NOT BE USED TO FUND:

- ❖ Facility improvements or repairs

- ❖ Merchandise for resale
- ❖ Purchase of artifacts

- ❖ Advertising costs
- ❖ Staff/Volunteer Time

PROJECT TITLE _____

CATEGORY:

Exhibitions

Collections Management/ Storage/Preservation

Audio/Video Recordings

Public Programs

Educational Materials

Grant amount requested: \$ _____

Application authorized by President's name (type or print) _____

President's Signature _____ Date _____

Digital signature accepted. Or please print, sign, and scan.

SUBMIT BY JULY 15, 2023

Email completed form to: certified@azhs.gov | Mailed applications will not be accepted.

For questions, please call (480) 929-0292. | azhs.org

PROJECT NARRATIVE

Name of organization _____

Project title _____

1. Description of project for which these contract funds will be used. What are the goals of the project? What product and/or improvement is to be accomplished, and how? **Please limit response to 300 words.**

2. Relevance: Why is the project important? **Please limit response to 300 words.**

3. Work plan: Detail the work to be done, and how volunteers and/or staff will proceed. Include a schedule or timeline, with volunteer hours and paid hours on the project. Will the entire project be completed by June 15, 2023? If it is a phase of a continuing project, explain and give the expected completion date for the entire project. **Please limit response to 300 words.**

4. Accountability: What measurements, other than dollars, will be used to measure the success of the project? **Please limit response to 300 words.**

5. Budget: Please complete the separate **Excel Budget Summary Form** and submit with your application.

SUBMIT BY JULY 15, 2023

Email completed form to: **certified@azhs.gov** | *Mailed applications will not be accepted.*

For questions, please call **(480) 929-0292**. | **azhs.org**