BVCF Special 2026
Grant Application Guidelines

Our Mission
Bigfork Valley Community Foundation exists to provide an opportunity for individuals to contribute to a private non-profit organization that will support the betterment of Northern Itasca Hospital District and its communities.

Our Vision
Our vision is to support the Hospital District and its communities by securing resources to maintain and enhance the quality of life for district members.

Application Overview
In general, all awards are considered one-time grants. Awards must be utilized for local projects and programs within the hospital district and its communities. Requests are reviewed for compliance with our guidelines, and higher priority is given to projects or programs that:

- Meet a need important to the community's quality of life
- Have a broad base of support
- Take an innovative and cost-effective approach
- Deliver maximum impact relative to the proposed expenditure
- Do not duplicate other efforts already in existence
- Serve the Northern Itasca Hospital District and its communities

Eligibility
Applicant must be a **nonprofit 501(c)(3) organization or a unit of state or local government** located in the Northern Itasca Hospital District.

Exclusions

- Individuals
- Loans, debt retirement or debt financing
- Political organizations or campaigns
- Fraternal organizations, societies or orders
- Religious purposes
- Endowments
- On-going staff positions
- Capital campaigns or fund raising event sponsorships
- Organizations with past due or incomplete final reports

Submission
All grant requests must:

- Be submitted on the Bigfork Valley Community Foundation BVCF Special 2026 Grant Application
- Include all documentation requested in the Grant Application Form
- Meet the application deadlines established in the Grant Application

Awards
Grant award maximum is $4,000.00

Evaluation
Final decisions will be made within 15 days following the review of the grant.

Grant Application Deadline is November 20, 2026.

Reporting
Bigfork Valley Community Foundation requires a written final report from your organization, due December 1, 2027, stating how the money was spent and if the proposed project was satisfactorily completed. Grantees who do not submit a written report will be disqualified for future grants.

Mail applications to:
Bigfork Valley Community Foundation
Attn: Kristen Huot - Chief Operating Officer
P.O. Box 44
Bigfork, MN 56628

We thank you in advance for honoring these guidelines.

Questions may be directed to Kristen Huot at the above address, or at 218.743.4116 or via email at kristen@bigforkvalleyfoundation.org

Grant criteria for selection:
To support our underserved rural communities, including elders, veterans, youth at risk, people with disability, and LGBTQ+, in their nonclinical and cultural solutions that foster belonging, meaning, wellbeing, and purpose.

Bigfork Valley Community Foundation

P.O. Box 44
Bigfork, MN 56628
218.743.4116

BVCF Special 2026 Grant Application

Grant Application Deadline is November 20, 2026

Organization Name: _____

Project Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____ Telephone: (_____)_____

Contact Person: _____ Title: _____

E-mail: _____

Tax Status: Check one: ☐ 501 (c)(3) Non-profit ☐ Governmental Organization

Federal Tax ID #_____

Please check the area that best describes your organization:

☐ Arts & Culture ☐ Education ☐ Health & Human Services

☐ Civic ☐ Other_____

Please describe the mission, nature, and purpose of your organization:

_____

_____

_____

_____

Description of Project, Program, or Activity

Dollar Amount Requested from Bigfork Valley Community Foundation: _____

When will the funds be needed: _____

Hospital District geographic area to be served: _____

Client group to be served (i.e. children, elders, veterans, etc.): _____

Anticipated project period: From _____ To _____

Type of request: ☐ Capital ☐ Project/Program support

☐ Technical Assistance Other_____

How many people will this project benefit? _____

Please describe the nature, purpose and benefits of the project, program or activity for which you are requesting support.

_____

_____

_____

_____

How will this projected be funded or sustained in the future?

Please list any other community organizations that you are collaborating with on this project:

_____

_____

How will Bigfork Valley Community Foundation be recognized for its contribution?

_____

_____

_____

Project Budget:

Please attach a detailed project budget. Feel free to attach a narrative explaining your numbers if necessary. The budget should include both sources of INCOME for the project (indicate if these funds have been secured or are pending) as well as major EXPENSE categories. BE CERTAIN TO INCLUDE IN-KIND CONTRIBUTIONS TO THE PROJECT.

Project Checklist:

The grant process requires the following documentation, if applicable.

- ☐ Completed Bigfork Valley Foundation Grant Application form.
- ☐ A copy of your organization's 501 (c)(3) IRS tax exemption letter or a copy of your 501 (c)(3) application to the IRS.
- ☐ A copy of your organization's current budget for the project, program, or activity.
- ☐ List of Board Members.
- ☐ Other supplementary materials that describe your organization and its purpose and goals.

You will receive notification within 15 days of board decision.

Applicant Name (please print) _____

Applicant Signature _____

Date of Application _____

Please make a copy of this application for your organization's records.

FOR OFFICE USE ONLY

Comments:

_____

_____

_____

Recommendations:

☐ Decline ☐ Approve Amount $_____

☐ Defer and Review:

_____ _____

Signature Date