Default Question Block

Please complete the following application to be considered for funding. If you have any questions please contact Marsha McDaniel at marsha.mcdaniel@inl.gov (This form must be submitted by December 17, 2021)

All recipients must submit quarterly progress reports and a final summary report with photos.

Only 501(c)(3) nonprofit organizations are eligible for the grants. Proper tax-exempt paperwork must be provided in order to receive funding.

Organization Name

Please provide preferred contact information:
First Name

Last Name

Title

Phone Number

Email Address

Please provide an address to where the grant award check should be mailed:

Addressee Name:

Street Address or PO Box

City

County

State
Organization Website:

Block 1

Please provide the appropriate financial information (in dollars) for your grant request:

Grant Amount Requested

Total Project Cost

Matching Funds Identified (if any)

Block 2

Please provide a detailed description of your project:
What is the anticipated impact of this grant for your organization?

Please provide an estimated timeline for completion of your project:

Block 3

Application category:

☐ Small Business Development / Entrepreneurship
☐ Rural Innovation
☐ Innovation District
☐ Other

Category of INL Mission your application supports: (Check all that apply)

☐ Nuclear Energy
Block 4

How will INL's financial contributions to your project be used?


Please provide names and descriptions of other sponsoring or contributing organizations for the project:


Will this be a reoccurring project?

☐ Yes
☐ Maybe
☐ No

How will this project likely be funded in the future?
Block 6

Is this a local, regional, statewide, or nationwide effort?

☐ Local
☐ Regional
☐ Statewide
☐ Nationwide

Does your organization or partnering organizations attempt to influence legislation?

☐ No
☐ Maybe
☐ Yes

Does the organization receive funding from any federal, state or local government sources, or is it affiliated with any institution that does?

☐ Yes
☐ No
List amounts received during the past year, identify source, and indicate percentage of total budget such funding represents.

Block 6

Please provide information about your organization's annual budget:

Annual Budget (in dollars):

Percent of budget from private donations:

Percent of annual budget from government grants:

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