Aaniiih Nakoda Community Foundation

Individual Donations Application



All requests must be submitted in a timely manner with at least (15) Days in advance prior to the event. If the Board of Directors' approval is needed, turn it in before the 2nd Friday of the month to be added to the monthly meeting agenda. All requests will need to follow the grant guidelines.

Individual information

Name:

Mailing Address:

Phone number:

Email address:

Tribal Affiliation: Enrollment Number:

Descendent □ Non-Member

*Attach a copy of your Tribal ID or CIB

Eligible Category

- □ Youth
 - Individual
 - o **Team**
 - Name:
 - *Attach list of players •
- □ Elder Support
- □ Veteran Event/Activity
 - Attach documentation
- \Box Health and wellness activity
- □ Aaniiih and Nakoda Cultural event
- **Educational support**

- □ Arts community support
- □ Community Activity or Event not listed
 - Type:_

Do any of the following apply?

- □ Advertising and promotions, including advertising solicited on behalf of another organization.
- □ **Fundraisers** working on behalf of an organization.
- □ Federally funded programs serving the FBIC (Fort Belknap Indian Community) (i.e., BIA/IHS/Tribal Program hosted events)
- □ For-profit Businesses
 - Includes enrolled member's personal businesses on and off reservation.
- □ Adult Sports Teams/Individual Events Sponsorships
 - o Basketball tournaments, Indian Relay, Baseball, MMA fighting, etc.
- □ Family Honoring's or Personally Accepted Commitments
 - Powwow Special/honoring, Sundance, Sports honoring, etc.
- Donations and grants for Individual's personal gain- potential to EARN money.
 - o All Rodeos, including youth, Indian Relays, Events with Payouts, etc.
- □ Individual/family medical emergencies
 - Including medical travel support to appointments, surgeries, medical stays, etc.
- □ All Travel Assistance for adults

• Including paying for vehicle repairs to any vehical, at any time

- □ **Capital expenditures** (i.e., tractor for individual use, livestock for individual use)
- □ Debt Reduction
 - Will not pay off loans or help with personal debt
- □ Political purposes
- □ Activities or expenses incurred *prior* to grant date
 - Will not pay bills, invoices, etc.
- □ Capital campaigns

If you have marked any of the boxes in the above section, your activity or event is ineligible for funding from ANCF (Aaniiih Nakoda Community Foundation). * ANCF Reserves the right to review your application and research public events, as necessary.

Activity/Event Information

Description:

Budget with Amount NEEDED:

Fundraising efforts so far (List amount raised): _____

- \Box Raffles
- $\hfill\square$ Food sales
- \Box Auctions
- $\hfill\square$ Fundraising activities not listed

Attached:

- \Box Flyers
- \Box W9
- □ Budget
- \Box Other pertinent documentation
 - \circ Team information

By signing this you agree to use the funds as described above. Everything filled out was honest and to the best of your ability.

You also agree to turn in an <u>Activity Report</u> for use of funds once the activity or event is completed, or risk non funding for the next fiscal year.

ANCF is not responsible for costs incurred during activities or events funded by the foundation.

Print Name_____

Signature _____ Date _____