

# 2026 Rural Micro Grant Program

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## *Missoula County*

### *LOCATION ELIGIBILITY*

Thank you for your interest in applying for a Micro Grant. Applications are accepted monthly and are due by 5 p.m. on the last day of each month.

Once you begin an application, you can save your work and complete it later. The application will remain in draft form until you click the submit button. If you miss the deadline for one month, the application will be considered the month it is submitted.

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**All proposed projects must be located in Missoula County, outside of the City of Missoula limits.**

- The project location can be found online at <https://gis.missoulacounty.us/PropertyFastFacts/>.
- *If the project is located in the city, please discontinue this application and go to <https://www.ci.missoula.mt.us/304/Neighborhood-Grants> to learn about grant opportunities offered by the City of Missoula.*

### **Project Location\***

Is this project located **outside of the City of Missoula limits?**

#### *Choices*

Yes

No

### *LOCATION INELIGIBLE*

**All proposed projects must be located in Missoula County, outside of the City of Missoula limits.**

To exit the application, click the "Abandon Request" button on the bottom left of your screen.

City of Missoula grant opportunities can be found online

at <https://www.ci.missoula.mt.us/304/Neighborhood-Grants>.

## FUNDING ELIGIBILITY

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### Previous Funding\*

Have you received Rural Micro Grant Program funding in the **current calendar year**?

#### Choices

Yes

No

## FUNDING INELIGIBLE

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**Applicants may only receive Rural Micro Grant Program funds once in a calendar year.** We encourage you to apply next year. Please exit this application by clicking the "Abandon Request" button on the bottom left of your screen. Thank you.

## APPLICANT INFORMATION

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### Project Title\*

100 character limit

*Character Limit: 100*

### Amount Requested\*

Amount of money requested (\$100 minimum to \$500 maximum). No decimals.

*Character Limit: 20*

### Name of Applicant\*

*Character Limit: 250*

### Type of Applicant\*

#### Choices

501(c)3 not-for-profit organization

Citizen group

Community council

Individual

School

Special district

### 501(c)3 Verification

If the applicant is a 501(c)3 not-for-profit organization, upload proof of non-profit status (such as an IRS letter). If not applicable, leave blank and advance to the next question.

*File Size Limit: 2 MB*

**Age Verification\*****Are you a minor or high school student?**

Note: If the answer is yes, and the project is approved for funding, minors and/or high school students will be required to have an adult manage the finances and supervise the project. Adult contact information will be required before funding is distributed.

**Choices**

Yes

No

**Project Coordinator\***

Enter the name of the person overseeing the project to completion and who is responsible for submitting reports.

*Character Limit: 250***Project Coordinator Email\****Character Limit: 254***Project Coordinator Phone Number\****Character Limit: 250***Project Coordinator's Mailing Address\*****Address 1\****Character Limit: 250***Address 2***Character Limit: 250***City/Town\****Character Limit: 50***Zip Code\****Character Limit: 20*

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**PROJECT INFORMATION (20 POINTS)****Project Synopsis\***

In about 30 words, provide a summary of your project that a member of the public could understand.

Make sure to include:

- Who is being served (e.g., seniors, youth, a specific community or population).

- How the funds will be used (e.g., to purchase materials and supplies).
- What project or activities will the funds support (e.g., an after-school program or community clean-up).

Example: County funding supports the purchase of bikes for an after-school bike club at Clinton School for 5th-8th graders, providing a safe, educational, and fun activity when school is out of session.

*Character Limit: 200*

### Project Start Date\*

(estimate)

Note: Planning can start at any time, but costs incurred prior to the date on the award letter are not eligible for reimbursement (approximately one month after submission). Project must be completed within 90 calendar days from the date of the award letter.

*Character Limit: 10*

### Project End Date\*

(estimate)

Note: Planning can start at any time, but costs incurred prior to the date on the award letter are not eligible for reimbursement (approximately one month after submission). Project must be completed within 90 calendar days from the date of the award letter.

*Character Limit: 10*

### Project Schedule\*

In the table below, provide the tentative schedule for each of the main tasks and the responsible party for each task. The first row is required. Not every row needs to be completed.

#### Example:

June 1, 2026 - Pick up material from Lowe's - Melinda

June 6, 2026 - Coordinate working group at Heather's house - Heather

June 8, 2026 - Send invites to project installation event - Crystal

June 14, 2026 - Install project - Melinda, Heather, Crystal and volunteers

July 30, 2026 - Send project reports to Missoula County - Heather

Note: Planning can start at any time, but costs incurred prior to the date on the award letter are not eligible for reimbursement (approximately one month after submission). Project must be completed within 90 calendar days from the date of the award letter.

Date	Task	Responsible Party


**Project Zip Code\***

*Character Limit: 20*

**Project Address\***

Provide the address of the project location. If there is no exact address, explain the general area where the project will be implemented.

*Character Limit: 200*

**Private Property\***

Is the project located on private property?

**Choices**

Yes

No

**Project Partners\***

Are additional project partners required to complete the proposed project?

**Choices**

Yes

No

**Maintenance Plan\***

Does this project require ongoing maintenance?

**Choices**

Yes

No

***PRIVATE PROPERTY*****On Private Property\***

As indicated above, the project will be on private property.

What is the public benefit of the project? Will the public have access to the project?

*Character Limit: 1000*

## ***PROJECT PARTNERS EXPLANATION***

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### **Project Partners Details\***

As indicated above, additional partners are required to complete the proposed project. Who are the partners and what is their role?

*Character Limit: 3000*

## ***MAINTENANCE EXPLANATION***

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### **Detailed Maintenance Plan\***

As indicated above, this project requires an ongoing maintenance plan. Describe the plan and how it will be funded.

*Character Limit: 1000*

## ***PROJECT DETAIL (60 POINTS)***

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### **DEMONSTRATED NEED\***

(20 points)

What is the community need or demand for this project? Why is it important? Need or demand may be demonstrated with research, maps, data, and photos. (There are two optional file upload sections following this question to attach supporting documents.)

*Character Limit: 2000*

#### **Demonstrated Need (1) optional**

If you would like to upload research, maps, data, or photos, one file can be uploaded here. If you have no uploads, please advance to the next question.

*File Size Limit: 2 MB*

#### **Demonstrated Need (2) optional**

If you would like to upload research, maps, data, or photos, one file can be uploaded here. If you have no uploads, please advance to the next question.

*File Size Limit: 2 MB*

### **COMMUNITY BENEFIT\***

(20 points)

How will the project make a positive difference for the community? Connect the identified need to the community benefit.

*Character Limit: 1500*

**Beneficiaries\***

(5 points)

Explain who your project will serve. **Examples:** seniors, low-income households, children/youth, individuals in crisis, etc.

*Character Limit: 750***Project Reach\***

(5 points)

Provide an estimate of how many people will benefit from this project.

*Character Limit: 250***COMMUNITY SUPPORT\***

(10 points)

Attach two letters of support from non-related community members or community organizations.

**Support Letter (1)\***

Upload the first letter of support.

*File Size Limit: 2 MB***Support Letter (2)\***

Upload the second letter of support.

*File Size Limit: 2 MB***Additional Support (optional)**

Optional space to upload additional documents of support.

*File Size Limit: 2 MB*

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**PROJECT BUDGET (20 POINTS)****Project Budget**

In the table below, list all sources of funds required to complete your project. This includes the requested funding from the Rural Micro Grant and any additional funding. If the applicant is providing partial funding for the project, include that. Use whole numbers only. Do not include decimals.

**Example:**

**Rural Micro Grant Requested Amount: \$500**

Additional Funder #1, Melinda Jones (personal donation): \$100

Additional Funder #2, Heather Smith (personal donation): \$100

Additional Funder #3, Crystal Williams (personal donation): \$100

**Total Project Cost = \$800**

blank	Funder Name	Dollar Amount
Rural Micro Grant Requested Amount (required)		
Additional Funder #1 (if applicable)		
Additional Funder #2 (if applicable)		
Additional Funder #3 (if applicable)		
<b>Total Project Cost</b>		

### Project Costs\*

Complete the table below detailing project costs **to be funded only by the Rural Micro Grant**. The total must match the amount entered in the FIRST ROW of the project budget in the previous question.

The first row is required. Not all rows need to be completed.

#### Example:

Coffee for 60 volunteers, Hunter Bay, \$35

500 invite postcards, Staples, \$117

Five trees, Marchie's Nursery, \$348

**Total project costs from Rural Micro Grant = \$500**

Description	Vendor	Cost


### Funding Recognition\*

How will support from the Missoula County Rural Grants Program be recognized?

Support can be recognized through a variety of methods including a logo on a poster, on a web page, or by including an explanation of the funding source in event details.

*Character Limit: 500*

## ATTACHMENTS

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If applicable, upload the following attachments.

### Project Location Map (optional)

If a map would help explain the location of the project, upload it here.

*File Size Limit: 5 MB*

### Preliminary Project Design (optional)

If the project will be created from materials, do you have a preliminary sketch or design of how it will look? If so, upload it here.

*File Size Limit: 5 MB*

## ADDITIONAL FUNDING COMMITMENT

If funding has been committed by additional partners, upload written documentation of the amount committed from each partner.

### Additional Funder (1)

Upload written documentation of commitment from the first additional funder.

*File Size Limit: 1 MB*

### Additional Funder (2)

Upload written documentation of commitment from the second additional funder.

*File Size Limit: 1 MB*

### Additional Funder (3)

Upload written documentation of commitment from the third additional funder.

*File Size Limit: 1 MB*

## ***SIGNATURE***

### **Certifications\***

I hereby submit this application for funding assistance from Missoula County and certify the following:

- I certify, to the best of my knowledge and belief, that the information presented in this application is true and accurate.
- I understand that Missoula County is a local government unit and that records related to this grant are public.
- I understand that, if awarded, Rural Micro Grant Program funds will be used only for the proposed costs included in the Project Costs table.
- I understand that any unspent funds must be returned to Missoula County.
- I understand that reimbursement to other third parties who purchase goods and services to be used on the project is the responsibility of the recipients.
- I understand that information in addition to what is included in the application may be needed to make a final funding decision.
- I understand that the need for insurance coverage will be evaluated by Missoula County on a case-by-case basis and may apply to this project.
- I understand and agree that I am responsible to follow any laws relevant to my grant and will cooperate with Missoula County to document my compliance.
- I understand that I will be required to provide a final report and supporting documentation to Missoula County within 90 days of the date on the Award Letter.
- I certify that I will immediately report to Missoula County if there is a change in the scope of the project or an adjustment to the timeline that will exceed the 90-day completion deadline.

If you agree to these terms and conditions, type your name in the box below.

*Character Limit: 100*

### ***Where did you hear about the Rural Grant Program?***

*Character Limit: 250*

After you submit your application, an email confirmation will be delivered from Missoula County [administrator@grantinterface.com](mailto:administrator@grantinterface.com).

To ensure this does not get blocked by a spam filter, ask your email provider to unblock the email address.

## *END OF APPLICATION*

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