

2021-2023 Children's Museum Competitive Legacy Grant

Minnesota Humanities Center

Project Overview

This grant line is established to allocate grant funds appropriated to the Minnesota Humanities Center by the Minnesota State Legislature for Children's Museums in Minnesota. This program is defined in the legislation as:

**Sec. 2 ARTS AND CULTURAL HERITAGE
Subd. 8. Minnesota Humanities Center**

(c) Children's Museum Grants

(2) \$550,000 each year is for grants to other children's museums to be distributed through a competitive grant process for program development. The Minnesota Humanities Center must administer these funds using established mechanisms.

Project Name*

The Humanities Center will use this title when referencing this grant, including reporting on the Legacy website.

Character Limit: 100

Project Overview*

Please provide a one paragraph overview of this project. This paragraph will be used for reporting purposes on the Minnesota Humanities Center's website, the Legacy reporting website, and elsewhere when needed.

Character Limit: 1000

Project Details*

Please explain the project and specific activities that will be completed with this funding.

Character Limit: 10000

Organization or Project Website

Character Limit: 2000

Project Start Date*

This date may not be before December 2021 and is only an estimate. The actual project start date will be when a grant agreement is fully signed.

Character Limit: 10

Project End Date*

This date may be no later than August 31, 2023.

Character Limit: 10

Project Timeline*

Please explain the timeline for this project, including anticipated timing of activities outlined in the project details.

Character Limit: 10000

Counties Served*

Choices

- Statewide
- Aitkin
- Anoka
- Becker
- Beltrami
- Benton
- Big Stone
- Blue Earth
- Brown
- Carlton
- Carver
- Cass
- Chippewa
- Chisago
- Clay
- Clearwater
- Cook
- Cottonwood
- Crow Wing
- Dakota
- Dodge
- Douglas
- Faribault
- Fillmore
- Freeborn
- Goodhue
- Grant
- Hennepin
- Houston
- Hubbard
- Isanti
- Itasca
- Jackson
- Kanabec

Kandiyohi
Kittson
Koochiching
Lac qui Parle
Lake
Lake of the Woods
Le Sueur
Lincoln
Lyon
Mahnommen
Marshall
Martin
McLeod
Meeker
Mille Lacs
Morrison
Mower
Murray
Nicollet
Nobles
Norman
Olmsted
Otter Tail
Pennington
Pine
Pipestone
Polk
Pope
Ramsey
Red Lake
Redwood
Renville
Rice
Rock
Roseau
Scott
Sherburne
Sibley
St. Louis
Stearns
Steele
Stevens
Swift
Todd
Traverse
Wabasha
Wadena
Waseca
Washington

Watonwan
 Wilkin
 Winona
 Wright
 Yellow Medicine

Goals, Outcomes, and Evaluation

Guide:

Goals: What are the goals of your project and how do those goals align with the goals of the grant program? How will you know you've been successful?

Measurable Outcomes: If you accomplish your planned activities as proposed, what outcomes are you hoping to see, that can be measured/tracked? *(Note: this section will be used on the Legacy reporting website)*

Evaluation Plan: How will you track, measure, and evaluate your goals and outcomes? What methods will you utilize, what information will you collect, and how will you evaluate it, and what will you do with the results?

Project Goals*

What are the overall goals of the proposed project? How do these goals align with the goals of the grant program?

How does the project/exhibit/programming include and reach Minnesotans of all ethnicities, abilities, and incomes?

Character Limit: 5000

Proposed Measurable Outcomes*

Please list your measurable outcomes for this project. Who or what is expected to change as a result of the grant? If you accomplish your planned activities as proposed, what outcomes are you hoping to see, that can be measured/tracked? *(Note: this section will be used on the Legacy reporting website)*

Character Limit: 5000

Evaluation Plan*

Please outline the evaluation plan for this project, including:

1. What information will be collected to show activities have been completed and outcomes have been achieved?
2. What methods will be used to gather the information?

3. Who will be involved in evaluating this work?

Character Limit: 5000

Community Engagement

How was/is your community involved in the design/planning and implementation processes?*

Character Limit: 5000

Who in your community will benefit from your project and how do you know they will benefit?*

Character Limit: 5000

FTEs and Consultants

FTEs*

How many total FTEs (Full Time Equivalents) will be funded with this grant? For example: .5 (50%) of one staff person, and .35 (35%) of another = .85 total FTEs)

Character Limit: 10

Staff Roles*

Please describe the role(s) of the staff included in the FTE total above.

Character Limit: 1000

Tracking Staff Time*

Describe the checks and system your agency has in place to ensure that Legacy funds are charged in a way that accurately reflects actual employee time. How will you track staff time for the FTEs listed above?

Character Limit: 1000

Independent Contractors*

How many total independent contractors will be funded by this grant?

Character Limit: 10

Independent Contractor Roles*

Please describe the role(s) of the independent contractors included in the total above.

Character Limit: 1000

Additional Legacy Reporting Elements

Subject*

Please check the subject(s) below that best describes your project. This information will be reported on the Legacy reporting website.

Choices

Agriculture/Forestry/Mining
Archeology
Arts
Arts Access
Biological Diversity
Cultural Heritage Preservation
Education/Outreach
Historic Preservation
History
Natural Areas and Habitat
Natural Resource Information and Planning
Recreation
Renewable Energy
Tourism
Water Resources

Activity Type*

Please select the activity type that best describes your project. This information will be reported on the Legacy reporting website.

Choices

Analysis/Interpretation
Assessment/Evaluation
Capital Development/Rehabilitation
Demonstration/Pilot Project
Digitization/Online Information Access
Education/Outreach/Engagement
Fund Administration
Grants/Contracts
Inventory
Land Acquisition
Mapping
Modeling
Monitoring
Planning
Preservation
Research
Restoration/Enhancement
Technical Assistance

Budget and Finances

Financial Review*

The Humanities Center seeks to make grants to nongovernmental organizations that are financially stable enough to carry out the purpose of the grant. Before awarding a grant of over \$25,000 to a nongovernmental organization, staff need to assess a recent financial statement from the organization. Please indicate which of the following documents you are submitting for review:

Choices

Most recent certified financial audit (Org income over \$750,000)

Most recent IRS Form 990 (Org income \$50,000 or more and less than \$750,000)

Most recent board-reviewed financial statements (Org income under \$50,000 and/or no IRS Form 990)

Financial Statement Upload*

Please upload the financial statement you selected above.

File Size Limit: 5 MB

Grant Payments*

It is the Humanities Center's policy to issue grant payments in a manner that supports the successful completion of activities outlined in the approved grant proposal. Reimbursement is the preferred method of payment for Humanities Center grants. Grant payments may be made as advance payment of costs associated with a grant before the grantee has incurred the expense if the financial review and past grant performance support this method.

Please indicate which payment method you prefer:

Choices

Advanced payment

Reimbursed payment

Project Budget*

Please include a project budget that lists project income and expenses. Do not include an MHC administrative fee in your budget - this amount is deducted from the overall grant pool before awards are made. The Humanities Center highly recommends that your budget line items align with your accounting system to facilitate reporting and financial monitoring during the grant term. Should your budget need any explanation, please include a narrative below.

For any questions on allowable/unallowable expenses, please consult the **Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal Awards 2 CFR Chapter 1, and Chapter II, Parts 200, 215, 220, 225 and 230.**

Questions about this document can be directed to Alicia Waters, Grants Administrator, at alicia@mnhum.org

Character Limit: 10000 | File Size Limit: 5 MB

Demographic Information

The Minnesota Humanities Center believes in the power of humanities to connect people and communities, bridge differences, and positively shape our collective future.

Providing the requested demographic information is voluntary and your responses will not affect the decision making process for awarding this grant. Information will not be shared publicly about any individual person. Sharing your demographic information allows MHC to better understand who we are engaging with and funding, and who we are not, as we work to design, implement, and assess inclusive, equitable, and accessible funding opportunities.

Definitions: Use these when answering the questions below.

"Led by": 50% or more of the combined senior leadership and board of directors of an organization. For example, if a small organization has one executive director and five board members, three of those individuals represent 50%. If a large organization has five senior staff members on its leadership team and 15 board members, 10 individuals in that combined group represent 50%. How your organization chooses to define its senior leadership is up to the organization's discretion in good faith. We recognize that precise demographic data may not be readily available for all senior leaders and board members. Please use the best information you have available.

"Primarily serve": 50% or more of the clients and community members served by your organization's programs. We recognize that precise demographic data may not be readily available for clients and community members served. Please use the best information you have available.

Is your organization led by Black, Indigenous, and/or people of color?

Choices

Yes

No

Does your organization primarily serve Black, Indigenous, and/or people of color?

Choices

Yes

No

Is your organization led by women?

Choices

Yes

No

Does your organization primarily serve women?

Choices

Yes

No

Is your organization led by LGBTQ+ people?

Choices

Yes

No

Does your organization primarily serve LGBTQ+ people?

Choices

Yes

No

Is your organization led by disabled people/people with disabilities and/or neurodiverse people?

Choices

Yes

No

Does your organization primarily serve disabled people/people with disabilities and/or neurodiverse people?

Choices

Yes

No

What is your organization's annual budget?

Choices

Up to \$50,000

\$50,000 - \$250,000

\$250,000 - \$500,000

\$500,000 - \$750,000

\$750,000 or more

Authorized Representative

Please include contact information below for your organization's authorized representative. This individual must have the authority to sign the grant agreement and any subsequent amendments and/or extensions. If you do not list a project manager in the next section, this individual will be listed on the Legacy reporting website as the project manager.

Authorized Representative's Full Name*

Character Limit: 250

Authorized Representative's Title**Character Limit: 250***Authorized Representative's Phone Number****Character Limit: 30***Authorized Representative's Email Address****Character Limit: 254*

Project Manager

If this grant project has a project manager beyond the organization's authorized representative, please include contact information below for this individual. Humanities Center staff will communicate directly with this individual about the grant and they will be listed on the Legacy reporting website as the project manager.

Project Manager's Full Name*Character Limit: 250***Project Manager's Title***Character Limit: 250***Project Manager's Phone Number***Character Limit: 250***Project Manager's Email Address***Character Limit: 254*

Authorized Representative Certifications

Intended Purpose*

I certify that all money from this grant will be spent only for arts, arts education, and arts access and to preserve Minnesota's history and cultural heritage.

Choices

I agree

I do not agree

Supplement not Substitute*

I certify that these grant funds will be used to supplement and not substitute traditional sources of funding.

Choices

I agree

I do not agree

Unallowable Expenses*

I certify that funds will not be spent on: activities unless they are directly related to and necessary for the project; indirect costs or other institutional overhead charges that are not directly related to and necessary for a specific appropriation; fundraising; taxes (except sales tax on goods and services); lobbyists and/or political contributions; bad debts, late payment fees, finance charges, or contingency funds; parking or traffic violations; or out of state transportation.

Choices

I agree

I do not agree

Electronic Signature*

Enter your full name, business title, and the date of submission (e.g. Emi Sakura, Executive Director, September 1, 2015).

Character Limit: 250

By entering your signature information above and clicking "I Agree" below, you certify that the statements contained in this application are true and correct to the best of your knowledge and belief.*

Choices

I agree

I do not agree