



Potlatch Fund Application Form

InterTribal Canoe Journey

2012 INTERTRIBAL CANOE JOURNEY GRANT CYCLE

Potlatch Fund is pleased to announce the InterTribal Canoe Journey Grant Cycle to support participants of the *Paddle to Squaxin 2012!* Subject to Potlatch Fund receiving re-granting funds to support the project, grants will be awarded in amounts ranging from \$500 to \$1,500.

Potlatch Fund's Mission is to inspire and build upon the Native tradition of giving and to expand philanthropy within Tribal nations and Native American communities in the Northwest.

The name, **Potlatch Fund**, reflects a Northwest coastal tribal traditional ceremony and in the Chinook language potlatch means **to give** or **a gift**. Historically potlatches were occasions when individuals shared their good fortune through the distribution of gifts to members of their Tribe as well as those of neighboring Tribes.

Potlatch Fund is proud to support the Tribal Canoe Journey, which seeks to honor the centuries-old traditions of transport and trade by the coastal Tribes of the Northwest. Historically many traveled the waters to meet and gather for festivities. The modern summer canoe journey was revitalized in 1989, by Quinault elder, Emmett Oliver. Today the journey is an important event for many Tribes and has become a way of teaching today's youth Tribal history, Protocol, and substance prevention.

Who is eligible to apply?

This grant cycle is specific to the InterTribal Canoe Journey.

Organizations applying for funding must meet the following criteria:

- The organization must be Native-led.
- The organization must be paddling in the 2012 InterTribal Canoe Journey.
- The organization must be located in the States of Washington, Oregon, Idaho or Montana.
**Canoes originating from locations within Canada are not eligible to apply.*
- The organization must have a seaworthy canoe, ready for the 2012 journey.
- Organizations that have previously received a Potlatch Fund grant, may only apply to this grant cycle if they have completed all past reporting obligations.
- Organizations must be a 501 (c) 3 or have a fiscal sponsor (such as a Tribe) that is tax exempt.

How to apply

NEW PROCESS AVAILABLE: You may now fill out this excel document. The cover letter and canoe photo may also be sent electronically. **This certification page must be signed and mailed, faxed, or scanned along with your application and emailed.**

Submit one copy of cover letter, proposal and all attachments, via email to grants@potlatchfund.org , faxed to 206.264.7629 or on white 8 ½" x 11" paper, to:

Potlatch Fund
Attn: Canoe Journey
801 Second Ave
Suite 304
Seattle, Washington 98104

Applications must be received or postmarked by Friday, March 16, 2012



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Attachments (Please include ALL of the following items with your application)

Items must be submitted by:

attaching and emailing the documents with the completed application, or
print and fax to 206.264.7629, or
print and mail to: 801 2nd Ave, Suite 304 Seattle, WA 98144

Cover letter

Completed Application

Signed Certification Page

Two current photos of the canoe

Previous year's organization and project financial statements (*four pages maximum*)

And if you (please check only one of the following):

Are a federally recognized American Indian Tribal Government or section 7871 organization:

A list of Tribal Council Members in the Grant Application

Are a 501 (c) 3, or 501 (c) 4 attach:

Verification of your IRS approved tax-exemption status

A list of Board Members and Staff in the Grant Application

Have a federally recognized Native American Tribal fiscal sponsor,
please state so in your cover letter, and attach:

A signed letter (on their letterhead) supporting your application
and agreeing to serve as your fiscal sponsor

A list of their Tribal Council Members in the Grant Application

Have a 7871, 501 (c) 3, or 501 (c) 4 fiscal sponsor, state so in your cover letter and attach:

Verification of their IRS approved tax-exemption status

A signed letter (on their letterhead) supporting your application
and agreeing to serve as your fiscal sponsor

A list of their Board Members and Staff in the Grant Application

Applications must be received or postmarked by Friday, March 16, 2012

For questions please contact the Office Manager at 206.624.6076 ext 10 or email grants@potlatchfund.org

Late proposals will not be accepted



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InterTribal Canoe Journey

1) Organization Contact Information

Canoe Name: _____

Website: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Name: _____ Title: _____

eMail Address: _____ Alternate eMail: _____

Tribal Affiliation: _____

Phone: _____ Fax: _____

Other Phone: _____

Organization Status:

Federally Recognized American Indian Tribal Government

Tribally sanctioned 7871 organization

501(c)3 organization as recognized by the IRS If yes, EIN# _____

501(c)4 organization as recognized by the IRS If yes, EIN# _____

Fiscally Sponsored by a federally recognized Tribe, a 501(c)3, or a 501(c)4

Fiscal Sponsor Contact Information (if applicable):

Name: _____

Address: _____

City/State/Zip: _____ Email: _____

Contact Person/ Title: _____

Phone: _____

2) Organizational Financial Information

Amount Requested: _____

Total Project Budget: _____

3) Project Information

Which communities will be served? (Please check ALL that apply)

- | | | |
|----------|--------|-----------------|
| Rural | Elders | On-Reservation |
| Urban | Women | Off-Reservation |
| Regional | Youth | |

Which issues does your work focus on? (please check ALL that apply)

- | | |
|----------------------------|----------------------------|
| Cultural Preservation | Health |
| Education | Substance Abuse Prevention |
| Environmental Preservation | Language Preservation |



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4) Project Narrative

1) Summarize this grant request *(50 word maximum)*

2) Organizational/ Project Background

Please include the following information:

- complete mission
- purpose and involvement with the InterTribal Canoe Journey
- when your organizational involvement in the InterTribal Canoe Journey started
- history of accomplishments

3) How will your project positively impact the Native community you serve?
******Pay particular attention to the educational opportunities for Tribal youth******

Empty response box for question 3.

4) Please list other potential and actual sources of support for this project:

Empty response box for question 4.

**5) Please list individuals that will participate in this project:
Skippers, pullers, support staff, and other key members of your project
Please specify the number of elders and youth participating in your canoe family**

6) A draft calendar of the dates your group plans to participate in the canoe journey, paying particular attention to when your group will start paddling for Squaxin Island.

7) What else do you want us to know about your project, service, or organization?



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Project Funding Proposed Budget

INCOME	Provide details	CASH	Is income	
			Confirmed or	Anticipated?
Tribal Support**	_____	\$ _____	C _____	A _____
	_____	\$ _____	C _____	A _____
Foundation Support**	_____	\$ _____	C _____	A _____
	_____	\$ _____	C _____	A _____
Corporate Support**	_____	\$ _____	C _____	A _____
	_____	\$ _____	C _____	A _____
Individual Support**	_____	\$ _____	C _____	A _____
	_____	\$ _____	C _____	A _____
Other earned income	_____	\$ _____	C _____	A _____
	_____	\$ _____	C _____	A _____

** Support should include donations, grants, sponsorship, etc

Estimated Total Project CASH INCOME

\$ _____

EXPENSES	Provide details	CASH	INKIND (4)
Salaries and wages (break down by individual position and indicate full or part time):	_____	\$ _____	\$ _____
Employee 1	_____	\$ _____	\$ _____
Employee 2	_____	\$ _____	\$ _____
Employee 3	_____	\$ _____	\$ _____
Consultant 1	_____	\$ _____	\$ _____
Consultant 2	_____	\$ _____	\$ _____
	_____	\$ _____	\$ _____
Supplies	_____	\$ _____	\$ _____
	_____	\$ _____	\$ _____
	_____	\$ _____	\$ _____
Space Rental	_____	\$ _____	\$ _____
Travel (Mileage)	_____	\$ _____	\$ _____
Postage and delivery	_____	\$ _____	\$ _____
	_____	\$ _____	\$ _____
Other Expenses	_____	\$ _____	\$ _____
	_____	\$ _____	\$ _____

Estimated Total Project CASH EXPENSES

\$ _____

\$ _____

Current Year Operating Budget [annual totals] (3)

Year Ends on : _____
 Income \$: _____
 Expenses \$: _____



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InterTribal Canoe Journey

Applicant Canoe Family Name: _____

Fiscal Agent Organization Legal Name: _____

Mailing Address: _____

City: _____

State: _____ Zip Code: _____

Phone: _____

Fax: _____

Website: _____

Fiscal Agent Contact Name: _____

Title: _____

Phone: _____

eMail Address: _____

Fiscal Agent Information

Incorporation Date: _____

Federal IRS #: _____

State UBI #: _____

Fiscal Agent Budget

Year Ending: _____

Income \$ _____

Expenses \$ _____



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InterTribal Canoe Journey

Please list all Tribal Council Members or Board Members and Staff

Tribal Council Members or Board Members

First Name	Last Name	Title	Email	Tribal Affiliations
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				

Staff

First Name

Last Name

Title

Email Address

Tribal Affiliations

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13
- 14
- 15
- 16
- 17
- 18
- 19
- 20

1	First Name	Last Name	Title	Email Address	Tribal Affiliations
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					



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Please read, print, and sign this last page of the application. Return the signed document to Potlatch Fund by scanning and emailing the document with the completed application to grants@potlatchfund.org or fax to 206.264.7629 or mail to:
801 2nd Ave, Suite 304
Seattle, WA 98104

CERTIFICATION: I hereby certify that the information included in this application is true and correct.

If awarded funding from Potlatch Fund, I certify that funds will be used solely for the purposes outlined in this grant application and that the organization will obtain Potlatch Fund’s approval if the project’s purpose, timeline, or budget are significantly modified.

Under United States law, Potlatch Fund grant funds may be expended only for charitable, scientific, literary, or educational purposes. In accordance with this law, if awarded funding, I certify that my organization/group will not promote or engage in violence, terrorism, bigotry or the destruction of any State, nor will it make sub grants to any entity that engages in these activities.

Furthermore, if awarded funding, I certify that all canoes referred to in this grant application will be drug and alcohol free for the duration of the journey, and proper safety devices will be used by all participants while engaged in water based activities.

I also certify that, if awarded funding, my organization/group will acknowledge, wherever possible, Potlatch Fund’s support of the project or program. Finally, if awarded funding, I also agree to submit a written final

Signature of Organizational Representative	Title	Date
Print Name of Organizational Representative	Organization	
Signature of Fiscal Sponsor Representative <i>(if applicable)</i>	Title	Date
Print Name of Fiscal Sponsor Representative <i>(if applicable)</i>	Organization	

Important Notes

A final written report is to be furnished at the end of the grant period: **Friday, September 14, 2012.**

Potlatch Fund may monitor and conduct a review of operations under this grant, which may include a visit from Potlatch Fund personnel to observe your program, discuss the program and finances with your personnel and review financial and other records and materials connected with the activities financed by the grant.

Potlatch Fund is authorized to conduct audits, including on-site audits, at any time during the term of the grant.

Potlatch Fund will include information on this grant in its periodic public reports. Potlatch Fund may also refer to the grant in a press release, in which case a copy would be sent to you in advance. If you wish to make your own press announcement, please consult with Potlatch Fund.

Failure to comply with the terms of this grant application may result in immediate cessation of support from Potlatch Fund. In addition, if your organization expends or commits any part of the grant funds for purposes or activities other than the purposes and activities for which this grant is made, your organization must repay Potlatch Fund an amount equal to the amount of grant funds so expended for other purposes or activities.