



# Community Grant Application

## Mishawaka Business Association

103 E. Grove Street  
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Mishawaka, Indiana 46546  
Tel: 574.259.1833  
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Organization: \_\_\_\_\_  
Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Submitting Officer: \_\_\_\_\_  
Title: \_\_\_\_\_

Requested Amount \$ \_\_\_\_\_  
Non-Monetary Request: \_\_\_\_\_

Reason for Request: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date of Request: \_\_\_\_\_ Date of Need: \_\_\_\_\_

**Spring Application: Deadline- May 31**  
 **Fall Application: Deadline- November 30**

**For Office Use Only**

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Date Received: \_\_\_\_\_  
Date Submitted to Grant Committee: \_\_\_\_\_

Recommended Action: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Board of Directors Decision: \_\_\_\_\_  
Date of Decision: \_\_\_\_\_  
Date Response Sent to Requesting Party: \_\_\_\_\_ Check Number: \_\_\_\_\_