



**La Crosse County Economic Development Fund, Inc.**

212 6<sup>th</sup> Street North, Room 1300, La Crosse, WI 54601  
www.lacrossecounty.org/community-development  
Ph: 608-785-5792

**Arts and Culture Grant Program**  
**Application Form**

**Instructions**

To apply for funding, please complete this application form, including all attachments, and submit it to the La Crosse County Community Development office at the above address or email to [sbachmeier@lacrossecounty.org](mailto:sbachmeier@lacrossecounty.org). Applications will not be considered until they are complete. We encourage you to contact us prior to completing this application to discuss availability of funds, processing time, and committee meeting dates. Completed applications will be presented to the County Economic Development Fund Board, which generally meet on the first Thursday of each month, for funding consideration.

Projects that relate to justice, equity, diversity, and inclusion are strongly encouraged.

**Applicant Name & Contact Information**

Organization Name: \_\_\_\_\_  
Type of Organization: \_\_\_ LLC; \_\_\_ LLP; \_\_\_ Sole Proprietorship; \_\_\_ S Corp; \_\_\_ C Corp; \_\_\_ Non-Profit  
Organization Mailing Address: \_\_\_\_\_  
Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_  
Contact Address: \_\_\_\_\_  
Contact Phone: \_\_\_\_\_ Contact Email: \_\_\_\_\_  
Organization Website: \_\_\_\_\_

**Grant Request (maximum grant award will be \$5,000)**

Amount of Grant: \_\_\_\_\_ Use of Funds: \_\_\_\_\_

Sources & Uses of Funds – including the grant that you are requesting; total sources must equal total uses.

Source(s)	Amount (\$)		Use(s)	Amount (\$)
<b>Total:</b>			<b>Total:</b>	

Minimum Grant Amount Needed to Proceed: \_\_\_\_\_

Please explain how the project would change with this smaller grant amount: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Narrative Attachment**

Please type a narrative response to the following questions/statements (a few paragraphs for each):

- a) Please summarize the project.
- b) Please describe the specific issue or opportunity that this project will address.
- c) Please discuss if this project will improve justice, equity, diversity, and inclusion within our community.
- d) Please discuss how this project will impact the local economy and/or other community benefits of the project.
- e) Please discuss what success for this project would be – use specific outcomes.
- f) Please explain how you plan to measure the above listed specific outcomes.

**Applicant Certification**

By signing below, the applicant:

- Certifies that to the best of its knowledge and belief, the information being submitted to the La Crosse County Economic Development Fund and its agents is true and correct;
- Certifies that it is in compliance with all laws, regulations, ordinances, and orders of public authorities applicable to it;
- Certifies that, if applicable, the organization is in compliance with and current on federal payroll withholding, state payroll withholding, payment of unemployment taxes, federal income taxes, state income taxes, and real estate taxes;
- Certifies that it is not in default under the terms and conditions of any grant or loan agreements, leases, or financing arrangements with any other creditor;
- Certifies that it has disclosed and will continue to disclose any occurrence or event that could have an adverse material impact on the project described in this application. Adverse material impact includes but is not limited to lawsuits, criminal or civil actions, bankruptcy proceedings, regulatory intervention or adequate capital to complete the project;
- Understands that, unless it's a trade secret, all information submitted to the LCEDF is subject to Wisconsin's open records law.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Printed Name: \_\_\_\_\_