

CLG MATCHING GRANT APPLICATION
Federal FY 2021

Applications must be received via email to DNR.Grants@illinois.gov by 5 P.M., February 15, 2021

1. APPLICANT

CLG Name: _____

Street Address: _____

City: _____ Zip: _____ County: _____

Local Contact: _____ Telephone: _____

Contact's Email: _____ U.S. Congressional District(s): _____

State Senate District(s): _____ State Representative District(s): _____

2. PROJECT WORKING TITLE: _____

3. TYPE OF PROJECT

Planning Survey Public Education National Register

4. GRANT AMOUNT REQUESTED: \$ _____

5. ESTIMATED FUNDING SOURCES

A. ESTIMATED LOCAL CASH MATCH \$ _____

B. ESTIMATED LOCAL VOLUNTEER-HOURS MATCH \$ _____

C. ESTIMATED LOCAL DONATED (IN-KIND) MATCH \$ _____

D. GRANT AMOUNT REQUESTED (from Line #4) \$ _____

E. ESTIMATED TOTAL PROJECT COST \$ _____

Requested CLG Grant Amount (Line #4) can be no more than 70% of the Estimated Total Project Cost (total of Line #5).

6. **SCOPE OF WORK:** Provide a detailed work program, explain how it meets local planning priorities, and demonstrate local support. (Attach pages as needed)

7. **ESTIMATED PROJECT TIMELINE** Include calendar and Project benchmarks. (Attach pages as needed):

8. **ESTIMATED PROJECT BUDGET** (Attach pages as needed.)

Item	Vendor	Quantity	Cost/item	Total Cost

9. **PROJECT PERSONNEL:** Please attach resumes for the Project Manager and consultants (if identified yet). They must meet the Professional Qualifications Standards as defined by the National Park Service, and be approved by the SHPO in writing. .

Project Manager: _____

Other Project Personnel (if applicable): _____

10. **PROJECT DOCUMENTS:** See instructions for guidance. Attach pages as needed.

11. **SIGNATURE OF AUTHORIZED CLG REPRESENTATIVE**

Signature: _____ Date: _____

Name and Title: _____

Email your completed grant application package (this form plus all supporting documents) to DNR.Grants@illinois.gov so that it is received by **5 P.M. on February 15, 2021.**