



## Vermont Humanities Council Mini-grant Application Form 2007

Date of Application: \_\_\_\_\_

Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Contact Person: \_\_\_\_\_

If approved, make check payable to: \_\_\_\_\_

Send check to: \_\_\_\_\_

Requested Amount: \_\_\_\_\_

In-kind Match: \_\_\_\_\_

Project Description: (Please feel free to attach a detailed description)

Project Goals and Benefits:

Description of Intended Audience and Number of Participants Expected:

Dates of Project:

Return completed form to: [jsteinbauer@vermonthumanities.org](mailto:jsteinbauer@vermonthumanities.org)  
Or FAX 802-262-2620 or mail to  
**Vermont Humanities Council**  
**Director of Literacy Programs**  
**11 Loomis Street**  
**Montpelier, VT 05602**