



363 Indianola Road, Bayside, CA 95524
info@hafoundation.org
(707) 442-2993



THE TRINITY TRUST

**2022 Summer Youth Program
Mini-Grant Application – Trinity County
Trinity County Application Deadline: March 15, 2022**

Please submit only one application per organization.

Amount Requested: _____ Organization: _____
(Average grant will be \$500)

Program Name: _____

Address: _____
(Street/PO Box) (City) (State) (Zip)

Phone: _____ Fax: _____

Email: _____ Website: _____

Executive Officer: _____ Title: _____

Contact Person: _____ Title: _____
(If different from above)

Email completed applications to: grants@hafoundation.org

Or

Mail applications to:
(postmarked by deadline)
**The Trinity Trust
Summer Youth Program c/o
Humboldt Area Foundation
363 Indianola Rd
Bayside CA 95524**

Does your organization have a tax exemption/501c3? *
 Yes No

Tax ID #: _____
(REQUIRED)

**If 'No' please provide the name and tax ID# of the organization holding tax-exemption that will be acting as your fiscal sponsor.*

(Name of Fiscal Sponsor)

FOR OFFICE USE ONLY

Program Officer: _____ Committee: _____ Profile #: _____ Batch #: _____
Review Date: _____ Action: _____ Amount: _____ Fund ID: _____ Grant #: _____
Program Area: RE THRIV JUST ECO



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Please supply all of the information requested below in the space provided (please be brief). Feel free to attach any information you have that will help us understand your program (flyer, application, etc.).

1. Description of Summer Program and how it fulfills a recreational and/or youth developmental need:

2. Geographic area your program will serve:

3. Projected dates, hours, and location of Summer Program:

4. Cost to participant and criteria for participation:

5. If your organization ran a Summer Program in **2021**, list the:

a. Total number of **Trinity County** children served during **2021** Summer Program:

b. Counting each child only once; average number served **daily** last summer:

Ages: 0-5yrs ____ 6-10yrs ____ 11-14yrs ____ 15-18yrs ____ TOTAL: ____

c. **Number of scholarships** provided for families who could not afford the fee: ____

6. Total number **Trinity County** children *anticipate* in your **2022** Summer Program: _____

7. If you received funding from Trinity Trust for your Summer Program last year, give a brief accounting of the expenditure of those grant funds:

