

**Explore North Coast**  
**P.O. Box 4712**  
**Arcata, CA 95518**  
**(707) 825-9221**



[www.explorenorthcoast.net](http://www.explorenorthcoast.net)  
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## Grant Application

1. Applicant name: \_\_\_\_\_

2. Address: \_\_\_\_\_

3. Phone number: \_\_\_\_\_ ACA#: \_\_\_\_\_

4. List the course title, instructor's name, address, and where the instruction will occur:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Date of instruction: \_\_\_\_\_

6. Total cost of instruction: \_\_\_\_\_

7. Grant amount requested: \_\_\_\_\_

Submit receipts for the training no later than 30 days after the training has been completed.

## Grant Provisions

The following provisions apply to all grants awarded by Explore North Coast (ENC). To be awarded a grant, the applicant must agree to all of the following provisions.

1. Funds shall only be used for the purpose for which awarded. Any desired changes in the use of funds shall be requested in writing to the Board of Directors.
2. ENC will make grant payments for skills instruction directly to the training provider.
3. Receipts for skills instruction shall be provided to the Board of Directors no later than thirty (30) days after the instruction date specified in the application.
4. Grant awards are valid for a period of thirty (30) days after the instruction date specified in the application. Any extension of the grant shall be requested in writing to the Board of Directors.
5. The grant recipient shall retain all documents related to the grant for at least three (3) years following completion of the award and shall make such documents available for audit if requested by either the ENC Board of Directors or by any government agency with audit responsibility.
6. The grant recipient shall provide the ENC Board of Directors with copies of any publicity involving the grant and should make every attempt to recognize ENC for the award.
7. If the terms of the grant cannot be met, the grant recipient shall advise the ENC Board of Directors and the award will be canceled.

*I have read and agree to the terms above:*

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_