Hubbard County Coalition of Lake Associations (HCCOLA)
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May 30, 2026

Subject: Hubbard County Coalition of Lake Associations (HCCOLA) Charitable Fund Grant Application Guidelines

The Hubbard County Coalition of Lake Associations (HCCOLA) Charitable Fund is seeking grant proposals for up to $2000. The grant proposal deadline is Monday, October 19, 2026 for grant funding for 2027. The grant award(s) will be communicated in November, 2026 and made available for June 2027 The awarded fund must be spent in 2027, unless a pre-approved extension is granted.

The HCCOLA Charitable Fund will consider grant applications from 501(c)(3) nonprofit organizations and community groups. The geographic eligibility area is Hubbard County and watersheds that impact Hubbard County. The HCCOLA Charitable Fund Advisory Committee may further define the HCCOLA area in support of the Funds' purpose.

The HCCOLA Charitable Fund provides financial support for charitable and educational programs, projects and activities that facilitate cooperation among member lake associations and to assist in encouraging environmentally sustainable use of lakes and watersheds that protect, preserve, and enhance the quality of area lakes and their environs including funding for:

- Early detection of aquatic invasive species (AIS) and aquatic vegetation surveys
- Research, studies or projects on water quality, and shoreland development, AIS prevention, and disseminating information thereof to member associations and the general public.
- Developing and presenting guidelines concerning the development, and preservation of the rivers, lakes, shorelands and other lands to agencies of the government, business and private individuals in order to bring about appropriate action for the effective use of these valuable natural resources.
- Support of acquisition of property for sustainable public use, e.g. Conservation Easements.
- Support for the establishment of individual lake association educational and charitable funds.
- Other charitable and educational activities that support the HCCOLA and associated lake associations.

Eligible projects include, but are not limited to restoration of critical shoreline habitat, buffer strips, rain gardens, shoreline erosion, redirect storm water run-off, AIS prevention, vegetation mapping, and education strategies in cooperation with shoreline restoration projects, public awareness, specialized sampling research, and limited support for scientific studies.

Eligible projects can be used as a local match for Clean Water Legacy Amendment grants or Board of Soil and Water Resources (BSWR) grants.

For every $1 contributed by HCCOLA Charitable Fund, applicant must match $1 toward the project. Matches can be comprised of volunteer labor, in-kind services, donated materials, and/or cash. In-kind match of labor / volunteers can be estimated at $25.00 per hour for unskilled activities.

At the conclusion of the project, a final summary report on accomplishments, costs and benefits should be submitted along with receipts.

Ineligible projects include watercraft inspection supplemental funding, water quality monitoring, rip rap, weed harvesters, fish stocking, septic upgrades, chemical treatments for management of AIS, legal aid, and general operating expenses.

Applications will be reviewed by the HCCOLA Charitable Fund Advisory Committee that will make recommendations for funding to the Hubbard County Coalition of Lake Associations Board of Directors. All paperwork will be shared with the Northwest Minnesota Foundation.

Criteria for selection:

- Relationship of the project to HCCOLA Charitable Fund mission and goals as stated previously.
- Evidence of grassroots support involving the project, (e.g. letters).
- Identified purpose and need for project.
- Clear goals and action steps for completing the project.
- Description of working relationship(s) with other partner(s) and/or funding sources.
- Potential long-term impact of the project.
- Evidence of an evaluation plan (i.e. participant evaluations or surveys).
- How the project supports the ongoing health of waters / watershed, (e.g. coordination with local water plan, utilization of site as demonstration model, and educational value).
- Proposal for completion, ongoing maintenance, and with status reports as project finishes, plus at 1 year, 3 years, and 5 years.

A complete application includes the following:

1. Application cover sheet.
2. Project narrative (up to 2 pages) which addresses the selection criteria (above).
3. Budget form.
4. Support letter from someone familiar with the project other than the applicant.
5. Information about your organization and/or project (flyers, brochures, etc.)
6. If organization does not have 501(c)(3) status, must secure and state fiscal host (not including LGU).

The HCCOLA Charitable Fund Request for Grant applications deadline is **October 19, 2026**. Mail to Hubbard COLA, P.O. Box 746, Park Rapids, MN 56470 or email the signed Grant application / documentation to: hccolamn@gmail.com

The HCCOLA Charitable Fund works in collaboration with the Northwest Minnesota Foundation (NMF), a 501(c)(3) charitable foundation, serving as a regional community foundation. The fund derives its legal status through NMF which owns and manages the assets. Final authority over management and disbursement of funds rests with the NMF Board of Directors.

Hubbard County Coalition of Lake Associations Charitable Fund

Grant Application Cover Sheet

Organization Information

Applicant Organization: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Contact Person / Title: _____

Telephone #: _____ Fax #: _____ Email Address: _____

IRS tax exempt status (check one): _____ Public; _____ 501(c)(3) Federal I.D. number _____

_____ Other (specify if using a fiscal agent/host) _____

Financial Information

Total Project Cost: $_____ Amount requested from the HCCOLA Charitable Fund: $_____

Other funding sources to which you are applying for this project:

SOURCE	**Requested Amount**	**Committed or Pending**	**Date of Commitment**

Project Information

Project Title: _____

Project Duration: Beginning Date: _____ Ending Date: _____

Brief Summary of Project: _____

_____

_____

_____

Attach a two-page project narrative describing:

- The applicant organization, partners, & who will help you? Discuss the role of partners & financial commitments.
- The people who will benefit from the project.
- The purpose & need for the project; describe the opportunity, challenge, issue or need the proposal addresses.
- How will your project address the above situation? How will the project be completed, who will do the work, etc.
- How the project supports the HCCOLA Charitable Fund mission / goals & ongoing health of waters / watershed
- How and when the project will be evaluated
- Proposal for completion, ongoing maintenance & status reports as project finishes, plus at 1 yr, 3 yrs, & 5 yrs.

Geographic area to be served by project: _____

_____ _____

Executive Director, Board Chair or Committee Chair Signature Date

_____

Printed Name of Signee

Hubbard County Coalition of Lake Associations Charitable Fund
Grant Project Narrative

Project Title: _____

Applicant Organization and Partners
Describe the applicant organization and partners (if any)…

Target Audience
Describe the geographic area to be served and the people who will benefit from the project…

Purpose of the Project
Describe the purpose and need for the project and how it supports the HCCOLA Charitable Fund mission and goals…

Work Plan
Describe how the project will be completed, who will do the work, and other details…

Describe how the project supports ongoing health of waters / watershed

Evaluation
Describe when and how the project will be evaluated

Describe the proposal for completion, ongoing maintenance, and with status reports as project finishes, plus at 1 year, 3 years, and 5 years.

At the conclusion of the project, a final summary report on accomplishments, costs and benefits should be submitted along with receipts.

Hubbard County Coalition of Lake Associations Charitable Fund
Grant Project Budget

Office Use only:
Applicant
Applicant #:_____

Expenditure	**HCCOLA Charitable Fund Grant**	**Cash**	**In-Kind**	**TOTAL**
1. Personnel				
A. Salaries & Wages				
B. Fringe Benefits				
C. Consultants & Contract Services				
2. Non-Personnel				
A. Space Costs				
B. Rental, Lease or Equipment Purchase				
C. Technology Expenses				
D. Consumable Supplies				
E. Travel				
F. Telephone				
G. Other Costs				
H. Indirect Costs				
Total Costs				

Hubbard County Coalition of Lake Associations Charitable Fund
Actual Expenditures

Office Use only:
Applicant
Applicant #:_____

Actual Expenditure	**HCCOLA Charitable Fund Grant**	**Cash**	**In-Kind**	**TOTAL**
1. Personnel				
A. Salaries & Wages				
B. Fringe Benefits				
C. Consultants & Contract Services				
2. Non-Personnel				
A. Space Costs				
B. Rental, Lease or Equipment Purchase				
C. Technology Expenses				
D. Consumable Supplies				
E. Travel				
F. Telephone				
G. Other Costs				
H. Indirect Costs				
Total Costs				