New Mexico Indian Affairs Department FY25 Youth Council Special Project Grant Application

GRANTEE INFORMATION

Legal Name of Tribal Government:	_
Name of Person Submitting Form: (Person who can legally sign contract	tual agreements on behalf of the entity)
Title:	
E-mail:	
Address:	
Phone number:	
PROJECT/SERVICE INFORMATION	
Project Name (Be specific):	
Requested Amount:	
Describe how the project/service will support activities or the services will benefit the community (<i>See</i> NOFA Applic	cation Review Criteria):
(Ple	ase add additional pages as necessary)
Describe how the Tribal Government will be able to exper-	nd all funds by June 30, 2026 :
	ase add additional pages as necessary)
Is an itemized budget attached?	\Box Yes \Box No
Is a Letter of Support from Tribal Leadership attached?	\Box Yes \Box No
Signature:	Date: