



Montana Pilot Community Tourism Grant Program

Ronan Project Proposal Template

1. Project Information

Project Name: _____

Lead Organization: _____

Project Goal/Committee Alignment: *(Select one)*

☐ Economic Vitality

☐ Transportation & Walkability

☐ Downtown Design & Beautification

Steering Committee Members Involved: _____

Key Contact:

Name: _____

Address: _____

Phone: _____

Email: _____

2. Funding Request & Budget Overview

Total Project Cost: \$ _____

Grant Amount Requested: \$ _____

Matching Funds: \$ _____ *(if applicable)*

Source(s) of Matching Funds: _____ *(Public, private, federal, or state sources)*

Other Leveraged Funding: \$ _____ *(if applicable) (Funds leveraged from partnerships, city, county, state, or federal)*

3. Project Description & Phases

Brief Summary of the Project: *(Provide a concise overview including objectives and key activities)*

Project Phases & Timeline: *(Align with Year 1: Planning & Year 2: Implementation from SOW)*

Year 1: Planning *(if applicable)*

- Planning documents created or reviewed? **Yes / No**
- Transparency tools (e.g., Social Pinpoint for public updates) implemented? **Yes / No**
- Community/stakeholder meetings planned? **Yes / No**
- Coordination with Mission West, City of Ronan, County, and Tribal Council? **Yes / No**

Year 2: Implementation *(if applicable)*

- Is the project shovel-ready? **Yes / No**
 - Has construction-related planning (PER, PAR, etc.) been conducted? **Yes / No**
 - Will the project engage local businesses and residents? **Yes / No**
 - What community fundraising or long-term sustainability plan exists?
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4. Community Impact & Economic Development Goals

How does this project impact the community? *(Address economic growth, tourism, transportation, or infrastructure benefits)*

Projected Outcomes & Metrics for Success: *(Select applicable)*

- ☐ Increased business revenue & tourism foot traffic
- ☐ Improved walkability & non-motorized infrastructure
- ☐ Historic preservation or façade improvements
- ☐ Increased public safety (lighting, accessibility, etc.)
- ☐ Other measurable impacts: _____

5. Alignment with Scope of Work

Does the project meet the goals of the Montana Pilot Community Tourism Grant Program (MTPCTGP)? *(Explain how)*

Is the project sustainable beyond the grant period? *(If yes, explain funding strategy)*

Are there partnerships with local organizations, businesses, or tribal councils? *(List any collaborators)*

Does the project align with one of the top three economic development priorities? *(Check one or more)*

- ☐ **Economic Vitality** *(Housing, Jobs, Façade Grants, Fairgrounds, Downtown Revitalization)*
- ☐ **Transportation & Walkability** *(Sidewalks, bike paths, crosswalks, connectivity)*

[] **Downtown Design & Beautification** (*Murals, lighting, trees, wayfinding signage, streetscape upgrades*)

6. Sustainability & Long-Term Plan

Will this project require ongoing maintenance or funding? (*If yes, explain sustainability strategy*)

What entity will maintain this project after completion? (*City, County, Nonprofit, Private Owner, etc.*)

Will there be a local fundraising component? (*e.g., community donations, event fundraising*)
Yes / No

If yes, describe:

Will this project be integrated with other regional or state initiatives? **Yes / No**

If yes, list initiatives:

7. Compliance & Transparency Plan

Does the project have a public engagement plan? (*Social Pinpoint, community meetings, online dashboards, etc.*) **Yes / No**

If yes, describe:

Will project updates be provided to local councils (City, County, Tribal)? **Yes / No**

If yes, provide meeting schedule:

Does the project include a review by economic development specialists? **Yes / No**

If yes, list advisors:

8. Supporting Documents *(if applicable)*

Please attach or reference the following documents as relevant to your project:

☐ Letters of support from businesses, community organizations, or government entities

☐ Maps, renderings, or site plans

☐ Budget breakdown

☐ Quotes from contractors or consultants

☐ Copies of planning or environmental reports

☐ Documentation of leveraged funds

Signature: _____ **Date:** _____

Print Name: _____ **Title:** _____