RAMSEY/WASHINGTON RECYCLING & ENERGY
CONNECTING VALUE TO WASTE

Application for Ramsey County Food Recovery/Gleaning Grants

Before completing this grant application, please review grant guidelines in detail.

Organization Name:

Applicant Name:

Primary Organization Address:

Other Organization Addresses:
If your organization has multiple locations from which food will be distributed, please list them here.

Location(s) and organization name(s) located in Ramsey County and/or Washington County where food will be collected/donated and estimated amount of food to be collected/donated:

Have you already received approval to collect food from this/these location(s)? ❏ Yes   ❏ No

If you answered no, describe your engagement plan and timeline to receive permission to collect from these organizations.

Applicant Phone Number:

Applicant Email Address:

Organization Type:

Organization Demographics (optional)

We want to better understand who our program is reaching and how to meet the unique needs of each organization. Please check any boxes that apply to your organization.

Organization/Business Leadership (select all that apply) - Please answer based on organization's executive director or business owner:

❏ Women led   ❏ American Indian/Alaska Native led   ❏ Asian led

❏ Black or African American led   ❏ Latino/Hispanic led   ❏ White led

❏ Two or more races led   ❏ Immigrant led   ❏ Not applicable

Description of organization, including mission, key objectives, and populations/geographic areas served.

[ ]

Description of Activities: *Please provide a detailed description of the food recovery and gleaning activities that you plan to do using this grant.*

Organizations recovering food: *Please include information about your timeline, organizations/farms/markets from which you plan to recover food, locations of activities, and plans for distributing collected food (including partnering organizations, if applicable).*

Organizations donating food: *Please include information about organizations to which you plan to donate (including locations) and specific details about the types of food and estimated quantities being donated (for example, dairy products, fresh produce, etc.).*

[ ]

How many pounds of food do you currently collect/recover or donate per week?

[ ]

Do you anticipate that amount increasing through this program? If so, how many additional pounds do you estimate collecting or donating per week?

[ ]

How many pounds do you currently distribute per week? (Can be same as above if all food collected is distributed)

[ ]

How do you currently dispose of food waste (i.e food scraps collection, food to hogs, trash collection)

[ ]

Would you be interested in learning more about an additional grant opportunity to help increase your recycling/organics program? ❑ Yes ❑ No

Please describe any activities focused on addressing environmental justice, such as improving access to healthy foods for vulnerable communities (low-income, BIPOC individuals, elderly populations, people without transportation, others who experience increased burden of environmental risk); increasing access to culturally relevant foods, or other examples.

[ ]

Budget Table Instructions: *Please complete the table below with information about each item that would be purchased with grant funds. Please list each material in a separate row (you may have more than one row for each activity). If the item you are listing does not have a number, such as staff time, leave the box in the Number column blank, or type in N/A, and complete the staffing costs table below. If you need additional space, please attach an Excel spreadsheet with a similar table when submitting your application or add more rows to the table below.*

Budget Table:

Activity	Materials	Number	Total Cost
Ex: Food collection from grocery store	Mobile carts	4	$400

Staffing costs (table): *If you are applying for reimbursement for staffing costs, please fill out the following table. Please note: The maximum amount that this grant can cover is the equivalent of a .5 FTE salary, and all time supported by the grant must be focused on food recovery work (collection, sorting, and distribution of recovered food).*

Employee title/role	Number of anticipated hours/weeks spent on food recovery/gleaning related to this grant	Hourly wages/ salary

Please send your completed application to **programs@recyclingandenergy.org**