



Oregon Department of Fish and Wildlife



Salmon and Trout Enhancement Program Mini-Grant Program Application Form

Organization: _____ **Federal Tax ID:** _____

Project Contact: _____ **Phone:** _____

Address: _____

Email: _____

Project Title: _____

Start Date: _____ **End Date:** _____

Type of Project:

- Angler Access & Opportunity Habitat Improvement Education & Public Outreach
- Inventory & Monitoring Fish Propagation STEP Facility Maintenance
- Other (describe): _____

Is this a new project or part of an ongoing project? New Project Ongoing Project

Did you work with your local STEP Biologist during the design of this project? Yes No

Project Location

Town/City: _____ **County:** _____

Watershed/Basin: _____ **Stream, Lake or Estuary:** _____

Recreational Area/Facility/School: _____

Project Goals and Objectives

Please provide a brief description of the project's goals and objectives.

Project Partners/Participation	
Name(s)	Role/Contribution

Project Description/Summary
<ul style="list-style-type: none"> • Please describe the project methods to be used, any deliverables expected and monitoring plans (if applicable). • Indicate how Oregon salmon and/or trout will benefit from the proposed project. • Describe how volunteers will be part of project implementation.

Project Budget

Item Description	STAC Grant Request	Non-Cash Contributions	Other Funds	Total
TOTALS				

Applicant Signature

Date

Applicant Printed Name

Submit Application to ODFW STEP Program, 4034 Fairview Industrial Drive SE, Salem Oregon 97302

PROGRAM STAFF ONLY (Name and Date Received)	
HQ STAFF:	
STEP Biologist Signature:	
STAC Signature:	