

**New Mexico Indian Affairs Department  
FY25 Veterans Grant Program Application**

**GRANTEE INFORMATION**

Legal Name of Tribal Government: \_\_\_\_\_

Name of Person Submitting Form: \_\_\_\_\_  
*(Person who can legally sign contractual agreements on behalf of the entity)*

Title: \_\_\_\_\_

E-mail: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number: \_\_\_\_\_

**PROJECT/SERVICE INFORMATION**

Project Name (*Be specific*): \_\_\_\_\_

Request Amount: \_\_\_\_\_

Describe how the project/service will enhance or supplement services for Native Veterans and how the services will benefit the community (*See NOFA Application Review Criteria*): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*(Please add additional pages as necessary)*

Describe how the Tribal Government will be able to expend all funds by **June 30, 2025**: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*(Please add additional pages as necessary)*

Is an itemized budget attached?  Yes  No

Is a Letter of Support from Tribal Leadership attached?  Yes  No

Signature: \_\_\_\_\_ Date: \_\_\_\_\_