Austin Public Health Mini-Grants: Investing in Lasting Health for Travis County

Chronic diseases are responsible for over half of all deaths in Travis County. This grave statistic highlights the urgent need for action, but there's hope: many of these diseases are preventable. **Austin Public Health (APH)** is committed to helping our community make lasting, healthy changes.

APH is excited to announce its Mini-Grant program for the 2026-2027 Fiscal Year. This program offers grants of up to **$2,500** to eligible organizations dedicated to promoting healthy living and addressing health disparities in Austin and Travis County. We are specifically looking for projects that create **lasting health change** and build sustainable solutions within the community.

Focus on Sustainable Impact

We want your project to make a lasting difference. Your idea should help people learn healthy habits and create things that support those habits over time.

For example, a community garden doesn't just give out food for one year. It can provide fresh vegetables and a place to exercise for as long as it's cared for.

Topic Areas

Your project must be about one or more of these five topics:

- Active Living (like physical activity)
- Community Gardens
- Tobacco-free Living
- Healthy Eating and Food Access
- Breastfeeding/Chestfeeding Support

Here are some examples of projects that create lasting change:

- **Active Living:** Add signs or equipment to a space for your organization or school, as well as providing shade structures like sails over a playground or trees along a walking path, to facilitate physical activity for years.
- **Healthy Eating:** Start a program at a school to teach kids about healthy eating, training on healthy eating policy, or a worksite health education program that will continue year after year.
- **Healthy Food Access:** Build, expand, or improve a food pantry through shelving or food storage equipment to make sure they always have healthy foods like fresh fruits and vegetables.
- **Breastfeeding Support:** Create a new lactation room or lactation policy at a workplace or organization that will be there for all future community members and employees.
- **Community Gardens:** Build, expand, or improve a garden that will give people fresh food, herbs, or a relaxation area that motivates people to be outside throughout the seasons.
- **Tobacco-free Living:** Implement a policy at a company or apartment building, improve the clinic referral system to tobacco quit resources, or create a youth tobacco-free ambassador program at a school that supports tobacco-free living long-term.

Eligibility and Requirements

Who Can Apply?

We welcome applications from organizations committed to making a lasting difference in Travis County:

- **Nonprofit organizations**, including faith-based organizations, community-based organizations, and childcare centers.
- **Tax-exempt organizations** under Sections 501(c)(3) or 170(b)(1)(a)(vi) of the Internal Revenue Code and units of government.
- **Public Schools and universities.**
- **Government entities.**

Please note: Organizations can apply in multiple focus areas, but will only be awarded one grant of up to $2,500. Past Mini-Grant award winners are not eligible to receive the grant two years in a row. For example, if you received this grant last year, you are not eligible to apply this year.

What are the Requirements?

To be considered for a mini grant, your project must:

- Be provided within **Austin and/or Travis County**.
- Start on or after **January 1, 2027**, and conclude by or on **August 1, 2027**.
- Focus on reaching individuals at greater risk of chronic disease in **vulnerable populations**. These include, but are not limited to, low-income populations, LGBTQ+ communities, older adults, people living with disabilities, and various racial/ethnic groups.
- Align with one or more of the five health focus topic areas listed above.

Receiving Funds:

Mini-grant funds are provided through a **cost-reimbursement process** as required by the City of Austin. This means your organization will pay out-of-pocket for all project costs incurred during the project timeline. Reimbursement will follow project completion and the timely submission of all required reporting documents, including receipts and logs.

To receive funds, all awarded organizations **must be registered vendors with the City of Austin**. If you have questions about vendor registration or aren't sure if your agency is registered, please email MiniGrant@austintexas.gov.

Sharing Results and Project Success:

Upon project completion, awarded organizations are required to submit a final, **1-page program summary**. This summary is your opportunity to share pictures of your project and highlight success stories and lessons learned. This report must be submitted along with the Payment Request and Expenditure Report Forms to receive reimbursement.

Funds CANNOT be used for:

- Awards, cash prizes, gift cards, contributions, or donations.
- Food or drinks, except when used for teaching or educational purposes (e.g., a cooking demonstration).
- Community Refrigerators
- One-time event projects (such as health fairs and marathons), as these do not promote sustained change.
- Medications, supplements, and general medical equipment (excluding AEDs, blood pressure monitors, and breast pumps).
- Direct Health Care Services and care.
- Operating costs are not directly part of this project/indirect costs.
- Travel costs, including mileage.

Application Timeline and Process

Important Dates:

- **Open applications:** Wednesday, October 1, 2026, at 12:00 AM Central Standard Time (CST)
- **Deadline for applications:** Friday, October 23, 2026, at 11:59 PM Central Standard Time (CST)
- **Award notice:** By Friday, December 18, 2026
- **Project must be complete by:** Sunday, August 1, 2027
- **Required grant close-out documents must be received by:** Sunday, August 1, 2027

Application Review:

The Mini-grant panel will thoroughly review each application, focusing on four key areas:

- **Demonstrated Need:** How the project addresses a clear community need.
- **Sustainable Community Change:** The project's potential to create lasting positive change.
- **Health Impact:** The overall effect the project will have on community health.
- **Addressing Health Disparities:** The project's emphasis on reducing health disparities—preventable differences in health outcomes experienced by socially disadvantaged populations.

Need Assistance?

Are you new to grant applications or need additional help? **Free technical assistance** is available! We can answer basic grant questions and provide guidance on creating Tobacco Policies and Lactation Rooms. Email MiniGrant@austintexas.gov to set up a meeting before you apply.

Healthy Living Mini-Grant Application

Thank you for your interest in the Healthy Living Mini-Grant. We're offering awards of up to **$2,500** for projects that promote healthy living and address health disparities in Austin and Travis County.

- You can save and resume your application later if needed.
- For questions or a paper copy, email **MiniGrant@austintexas.gov**.
- This is a **cost-reimbursement grant**. You must pay for project costs upfront and will be reimbursed after the project and required reporting are complete.
- Free technical assistance is available for grant basics. Email **MiniGrant@austintexas.gov** to schedule a meeting.

Section 1: Getting Started

Please review the full grant overview and eligibility requirements at:
https://www.healthyplaceshealthypeople.org/minigrant/

1. Applicant Eligibility *

- I represent an eligible organization, have read the full Grant Overview, and agree to comply with the grant requirements.
    - Yes
    - No (Please return after reading the overview.)

2. Prohibited Expenses * This grant **cannot** be used for the following. Check each box to confirm you understand and will not include these in your budget.

- Activities outside of Austin and/or Travis County
- Food or drinks (unless used for teaching/educational purposes)
- Awards, cash prizes, gift cards, or donations
- Community refrigerators
- One-time events (e.g., health fairs, marathons)
- Medications, supplements, and medical equipment (excluding AEDs and breast pumps)
- Direct health care services
- Operating or indirect costs not part of this project
- Travel costs, including mileage

3. Previous Funding *

- Has your organization received any funding from the City of Austin or Austin Public Health in the last 12 months?
    - Yes
    - No
    - Not Sure
- *If yes, please name the funding source and program:* _____

4. How did you hear about this grant? *

- *Mark all that apply:*
    - Austin Public Health Website
    - Healthy People Healthy Places Website
    - Social media
    - Radio
    - News
    - Friend, family member, or co-worker
    - Mini-grant flyers or promotional emails
    - Direct referral from a City of Austin employee
    - Other: _____

Section 2: Organization & Contact Information

1. Agency Information

- **Agency Name:** _____
- **Agency's EIN (if known):** _____
- **City of Austin Vendor # (if known):** _____
    - *Not sure if you're a registered vendor? Call* ***512-974-2018*** *or email us at* ***vendor@austintexas.gov***

2. Type of Agency *

- *Mark all that apply:*
    - Non-profit Childcare Center
    - Faith-Based Organization
    - Government Agency
    - Nonprofit (Tax-exempt organizations under Sections 501(c)(3) or 170(b)(1)(a)(vi) of the Internal Revenue Code)
    - Public School / University

3. School/University Applications ONLY *

- Do you have approval from your principal or administrator to apply?
    - Yes
    - No (Please get approval before applying.)

4. Agency Mailing Address *

- Address Line 1: _____
- Address Line 2: _____
- City: _____
- State: _____
- ZIP Code: _____

5. Tobacco-Free Policy

- Does your agency have a 100% tobacco-free policy that prohibits all tobacco use on company property? *(This policy must be a formal document signed by the head of the organization.)*

    Must be included with application and VERIFIED by APH to receive bonus points. A tobacco policy must be submitted within a formal organization document, such as a section of a handbook or on letterhead, and signed by the head of the organization/group. The policy must go above the Smoking in Public Places Ordinance (SIPPO) and cover all tobacco products, including vaping devices. Free technical assistance is available to interested organizations to create a policy. Email MiniGrant@austintexas.gov

    - □ Yes *(Please attach a copy of your policy.)*
    - □ No
    - □ Not Sure

6. Main Contact Information *

- *This is the person we'll contact about your application.*
- **First Name:** _____
- **Last Name:** _____
- **Title or Position:** _____
- **Phone Number:** _____
- **Email:** _____

Section 3: Project Details

1. Project Information

- **Project Title:** _____
- **Project Topic Areas:** *Mark all that apply:*
    - □ Active Living (Physical Activity)
    - □ Healthy Eating and Healthy Food Access
    - □ Tobacco-free Living
    - □ Community Gardens
    - □ Breastfeeding/Chestfeeding Support

2. Community Garden Projects ONLY

- Do you have permission from the landowner or site manager?
    - □ Yes
    - □ No (Please get approval before applying.)
- *If yes, please provide the contact's name that can verify your approval.*
    - **Name:** _____
    - **Email:** _____

3. Food Access Projects ONLY

- Do you have any food permits?
    - Yes
    - No (Please get approval before applying if required.)
    - No, this project doesn't require food permits.
- *If your project includes food provision, describe your food safety plan:*

- *How will you measure quality control?*

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4. Fiscal Agent

- Do you have a fiscal agent to manage the funds and receive reimbursement?
    - Yes
    - No
- *If yes, please provide their information:*
    - **Fiscal Agent's EIN (if known):** _____
    - **City of Austin Vendor # (if known):** _____

5. Funding Request *

- **Amount of funding requested:** _____ *(up to $2,500)*

Section 4: Detailed Project Information

1. Project Summary *

- In 3-5 sentences, tell us about your project idea and how you'll use the mini-grant funds.

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2. Community Need & Value *

- What will your project do, and why is it needed in the community?

3. Health Impact *

- How will this project improve the health or promote healthy lifestyles of the direct participants of this project?

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4. Community Benefit *

- How will the Austin/Travis County community as a whole benefit from this project?

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5. Target Population *

- Who does your project serve?
    - *Mark all that apply:*
        - Low-income
        - Hispanic/Latinx
        - Black/African American
        - Asian/Pacific Islander
        - Indigenous
        - LGBTQIA2S+
        - Older Adults
        - Children, Youth, Teens
        - Other: _____
- **ZIP Code(s) where the project will take place:** _____
- **Describe the project location(s):** (e.g., park, school, community center, virtual)

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6. Project Reach & Recruitment *

- How many people do you expect to reach or directly involve? (e.g., "250 students" or "approximately 1,500 community members")

- What steps will you take to get people to participate in the project?

- How do you plan to reach people with a greater risk of chronic disease in vulnerable populations?

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7. Project Sustainability *

Policy, Systems, and Environmental (PSE) Change: What specific policy, systems, or environmental change will your project work toward? (For example: a formal policy change at a school, a new partnership between organizations, or a physical improvement to a public space.)

Policy: This is a formal change to a rule or law.

- **Example:** A school creates a new policy that requires all science teachers to incorporate a lesson using the new school herb garden into the curriculum.

Systems: This is a change to the way a group or organization works.

- **Example:** A local food pantry is starting a new system that allows people to "shop" for the items they need instead of buying pre-bagged food.

Environmental: This is a change to physical surroundings.

- **Example:** A non-profit builds new benches and installs shade structures in a community garden, making it more inviting for people to use and be active.

Lasting Impact: How will this change continue to promote health and well-being in the community after the grant funding period is over?

Funding Beyond the Grant: How will the PSE change be sustained or supported without future mini-grant funding?

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8. Partnerships *

- Will you have partners for this project? If so, what groups and how will they contribute? If not, write "NONE" and share ideas for possible partners who could help achieve your project goals.

Section 5: Project Plan & Budget

1. Work Plan

- Provide the key steps, timeline, and lead person for your project from **January to August 2027**.

Steps	Timeline (Start – End Date)	Lead Person	Key Partner (if any)

Export to Sheets

- *If you attached a file, write "attached" here:* _____

2. Measuring Success *

- How do you plan to measure the success of this project? Please share your goals and objectives.

3. Budget *

- Please provide a detailed budget. You can attach a separate file or type it below. The budget must show how the requested funds will be used.

Item Description	Why Needed	Item Cost
Total Project Cost		**$**

Export to Sheets

- *If you attached a file, write "attached" here: _____*

Submission

- If you're submitting a paper copy, please email the completed application and all required documents to **MiniGrant@austintexas.gov**.
- **Application Deadline:** Friday, October 23, 2026, at 11:59 PM Central Standard Time (CST).
- For faster processing, please use the online form at: **https://www.healthyplaceshealthypeople.org/minigrant/**