Commissioners of	' Elk County Pa	rtnership Grants	
Community Foundation "Building A Path To Tomorrow"	Elk Co 32 South Sair @elkcountyfoundation	ounty Community Fo nt Marys Street, Suite 4 • P Saint Marys 814.834.2125 • Fax 81 n.org • www.elkcountyfoun	.O. Box 9 s, PA 155 4.834.2 idation.c
This grant application form is available submit it via email along with the reque <i>Grant Application</i> . In addition, a hard o materials that have not been emailed, m considered until all material has been re	ested support items as ou copy of the signed applic nust be mailed or deliver	Itlined in <i>Instructions for Sub</i> ation form, along with any sup ed to our office. Grants will no	<i>mitting a</i> oport ot be
Application DateLegal Name of OrganizationDate of Ir			
Is your organization tax-exempt under S	Section 501 (c) (3) of the	Internal Revenue Code? Y	Ν
Last Name	First Name		
Mailing Address			
City	State	Zip Code	
Phone Fax		E-mail	
Grant Area of Interest:			
The Arts		Other ( <i>please explain</i> )	
<b>Economic Development</b>			
Education			
The Environment			
Health and Social Services			
Project Duration:			

Updated 3-15-22

#### Grant Application Form

2

Grant Abstract – provide the following information briefly on this page. Additional explanation and information should be included in Grant Proposal Narrative outline found on page four of this application form.

**Brief Project Description** 

Who and how many will benefit?

What are your other sources of funding for this project?

Why is this project valuable/necessary?

How will it be funded in the future?

*How will you evaluate the success of this project?* 

Submit via email the online fillable PDF form, without signature, along with your narrative. Also, mail or deliver to our office a hard copy of the signed application, along with any other support materials that cannot be emailed.

# Please include the attachments:

- One copy of the Grant Application Form and abstract/narrative as describe on page four of the application.
- One copy of the current IRS determination
- One copy of the proposed program/project budget
- One copy of operating budget for the current and next fiscal year, including income statement and balance sheet. Need to send only a summary if possible.
- One copy of the most recent year-end financial statements (audited if available) if applying for over \$5000
- Name and addresses of your Board of Directors and administrative staff

The Undersigned hereby certify that all information contained in and submitted with this proposal is correct and that this proposal is submitted with the approval of the Board of Directors. This Organization will execute the Grant Agreement if a grant is awarded to us.

Signature of Board Chairperson

Date

Signature of Agency CEO

Date

# Grant Application Form Project Budget Statement

**Project Budget** – provide the following information on this page, you can add more detail to the narrative requirements found on page three of this application form if needed. List all income for this project including in-kind gifts

Source	Amount	(use numbers only)
Total		

Expenses	Amount	(use numbers only)
Tatal		
Total		



Elk County Community Foundation 32 South Saint Marys Street, Suite 4 • P.O. Box 934 Saint Marys, PA 15857 Phone 814.834.2125 • Fax 814.834.2126 eccf@elkcountyfoundation.org www.elkcountyfoundation.org

# **INSTRUCTIONS FOR SUBMITTING A GRANT APPLICATION**

A. Submit via email the online fillable PDF form, without signature, along with your narrative. Also, mail or deliver to our office a hard copy of the signed application, along with any other support materials that cannot be emailed.

# B. Grant Proposal Narrative should include the following information. Please provide your information in this order, using the outline.

#### 1. Organization Information:

- a. Brief summary of organization's history, mission and goals.
- b. Description of current programs and past accomplishments.
- c. Target population that this project/program will benefits and number of people served by this project.
- d. How does the agency work with others providing similar services, or how it is unique?

#### 2. Purpose of this Grant:

- a. Describe the program/project, the need(s) it will address and what it will accomplish.
- b. Is it a new or ongoing program/project of the organization?
- c. List the program/project goals, objectives.
- d. Describe the timetable for this program to be completed.
- e. Do other organizations provide services similar to your program? If so, why is it important that your agency also provides this service?

# 3. Budget Information

# (Please use page 3 of the application for section "a" and "b")

- a. State the exact dollar amount of program/project budget being requested for this grant and the expected expenses including in kind gifts.
- b. List all sources funding for the program/project.
- c. Indicate the amounts requested and the status of your proposal with each funding source if applicable
- d. If you get partial funding how would you adjust your project?
- e. What are the long-term strategies for funding the program/project beyond the grant period?
- f. If this is a collaborative proposal, how will this agency work with other organizations involved?

# 4. **Personnel and Follow-up**

- a. Indicate names and contact information for individuals responsible for this project.
- b. Provide names and contact information for other individuals involved in this project.
- c. What are the qualifications and expertise of the individuals responsible for the implementation of this program/project?
- d. How will you evaluate this program/project?
- e. Are there any special circumstances that ECCF should be aware of regarding your organization or the program /project?

4