2023 Union City Community Foundation Grant

*Erie Community Foundation Affiliates*

## Organization Name

## Organization Address

## Organization Phone Contact Email Address

## Applicant Name / Preferred Method of Contact

## IRS Determination\* EIN \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Please attach *ONE* copy of your IRS Determination Letter.

## Project Name\*

## Total Project Cost \*

State the total cost of your project.

## Amount Requested from UCCF\*

## Number of People Served \*

How many people will be directly impacted by this project?

## Target Population\*

Describe your target population. Who is the particular group of people that you have identified as the intended recipient project, program or event?

# General Information

## Grants are NOT awarded for the following:\*

#### Does your applications fall under one of these categories? Our Trustees reserve the right to

**make exceptions to any of the below as they deem appropriate. Please review items and choose the appropriate answer:**

Choices

Maintenance expenses

Normal operating expenses

Applications received after the application deadline

Debt Reduction

Endowments

Field trip costs - travel, entry fees, food, etc.

Funding to reimburse for costs incurred prior to the date of the grant award Fundraising costs/Raffles/Auctions

Individual projects or needs (except scholarships) Lobbying or political purposes

Program Advertisements

Replacement of government or other funding

Salaries

Sectarian Religious Activities

I have reviewed the choices and my application does not fall into one of these categories.

## Does your grant fall under the new Transformational Categories?

We are focusing on Transformational Grants. Grants will be reviewed through "priority lens" with all potential projects and initiatives given a higher priority that fall under one of these categories. If applicable, choose the appropriate answer.

**Choices**

MAIN STREET - Appearance, Opportunities, Business

RECREATION - Parks, Trails, French Creek

NEIGHBORHOODS - Well Kept, Attractive (Including Sidewalks, Trees and Blight)

IMAGE/ IDENTITY - Particularly to capitalize on successes

GOVERNMENT - Safe Community, Stable, Progressive

## Type of Funding Request \*

Please select the type of funding you are requesting. Choose one that best represents how the money will be used •

Choices

Capital, Facilities or Systems Needs Current Program Enhancement Festival

Program Expansion Technology

Youth Programs Other (please specify)

# Organizational Information

If a fiscal sponsor is submitting this application on behalf of another non-profit, the organizational information in this section must relate to the fiscal sponsor.

## Organizational History\*

Please describe your organization, its mission, and its history. If you are the organization requesting funds also describe your capacity for carrying out the proposed project.

## Financial Statement\*

Please provide your most recent year Financial Statement. The Financial statements are financial reports for the formal records of the financial activities and position your 501c3, this is not your bank statement.

## Current Fiscal Year Bud get\*

Please provide the current fiscal year budget for your organization. The budget shows how your organization is planning on getting their money in the fiscal year by listing its different sources of revenue and how that money is supposed to be spent on the organization's programs to achieve your goals and mission.

### Board/Trustee List \*

Provide a list of current Board of Directors/Trustees for your organization. Including contact information, email address, occupation/relevant experience. Please make sure the information is up to date as we may call or email them with questions.

## Other Organizational Documents

Please provide any additional organizational documents for consideration (e.g. recent annual report, - newsletter or other promotional materials). Did we sponsor you in the past? If so, provide your promotional material showing how you recognized the grant from UCCF. **Remember we like to see our name on items we sponsor!**

# Project Narrative

## Organizational Information If You Have A Sponsor\*

Please describe your organization, its mission, the history and your capacity for carrying out the proposed project. Enter N/ A if you are the 501(c)3 organization on the application.

## Need and Evidence

Describe the problem or critical need(s) your project addresses along with the evidence to justify the critical need.

## Activities and Outcomes

Describe the specific activities you plan to undertake to achieve your objective(s). Including the goal(s) and anticipated outcomes of the project. What do you hope to accomplish?

## Timeline\*

What is the timeline for the project? Include beginning and end dates.

## Project Leader\*

Identify the name, title and relevant experience of the project leader for this proposal.

## Project Team\*

Identify **(name, contact information, relevant experience)** the roles that you and, your staff, and your collaborators will play in this project.

## Proposal Budget\*

Complete and provide both revenue and expenses for the total project. Provide an explanation for each revenue and expense line item using the Line Item Description. NOTE: The amount you request and the amount under "UCCF Portion" listed in the Project Expenses must match. An Excel Proposal Budget will be provided for you to complete.

### Bank Statements\*

Please provide your three most recent bank statements.

## Evaluation \*

Please indicate what success will look like for this project. Also describe how you will evaluate your project.

## Sustainability\*

Can your project's goals be accomplished within the grant period? If not, how will the project be continued beyond the grant period? If your request represents a one-time purchase, expansion cost or event, please indicate your project will end within the grant period.

## Project Supporting Documents

Please provide any additional supporting documents and/or detail any additional information you would like to include for consideration.

## Additional Supporting Documents

Provide any additional supporting documents. **NOTE: When making a large purchase or repair please provide three quotes.**

*Signatures*

## Executive Director Date

Board President Date

## Fiscal Sponsorship Signature

If the application requires a sponsor organization, you must have it signed by your sponsor before the application will be complete.

## Executive Director Date

Board President Date