



GRANT APPLICATION

Legal Name of Organization:

DBA (if applicable):

Mailing Address:

Website:

Name of CEO or Executive Director:

Phone:

Email:

Application Contact & Title (if not the CEO or Executive Director):

Phone:

Email:

Organization Information

EIN:

Year Founded:

Type of Organization: 501(c)(3)

501(c):

Special District

Mission Statement:

Geographic Area Served (specific to this proposal):



Grant Request Information

Name of Program or Project:

Amount of Request: \$

Describe what the grant will be used for:

Organization's Fiscal Year: Start Date:

End Date:

Program or Project Budget:

Dates: from:

to:

Income:

Expenses:

Using a fiscal agent/fiscal sponsor. Name of fiscal agent/sponsor:

I certify that the information contained in this application is true and correct to the best of my knowledge.

CEO/Executive Director

Date



NARRATIVE

*Use 12-point font with 1-inch margins and include the **HEADING** provided for each question. It is not necessary to repeat the text of the questions.*

ORGANIZATION BACKGROUND.

Discuss the founding and development of the organization. Explain the original issue and/or opportunity the organization was founded to address and how that may have changed over time.

GOALS.

Describe the organization's current goals as well as the challenges and opportunities facing the organization in the next few years.

CURRENT PROGRAMS.

Provide a brief description of the organization's current programs. Describe the population served by each program and the challenge each program is seeking to address.

PROGRAM OR PROJECT REQUEST.

- a. Describe the goals and objectives, activities, and timeline for this program or project.
- b. Explain how this program will serve the Adams County residents.
- c. Identify the cost per person for the program.

PAST RESULTS.

For existing programs, provide data on the number of unduplicated people served through the program and the number of unduplicated Adams County residents served by the program in the last calendar year.

COLLABORATION.

Describe the organization's partnerships with other organizations on this program/project.

VOLUNTEERS.

Describe how the organization involves volunteers (other than the board of directors). Include number of volunteers and hours.

INCLUSIVENESS.

Describe how the organization strives to be inclusive in its programs, staff, board, and volunteers, and describe the progress to date.

OPTIONAL.

If there is additional information that is vital to convey in this proposal, do so here.



SOURCES OF INCOME TABLE. Complete the table below for the organization as a whole, based on the most recently completed fiscal year.

Percentage	Funding Source
%	Government grants (federal, state, county, local)
%	Government contracts
%	Foundations
%	Business
%	Events (include event sponsorships)
%	Individual contributions
%	Fees/earned income
%	Workplace giving campaigns
%	In-kind contributions (optional)
%	Other
%	TOTAL (must equal 100%.)



ATTACHMENTS

Label each attachment and provide in the order listed.

1. **CURRENT BUDGET FOR ORGANIZATION.** Include revenues and expenses.
2. **BUDGET FOR PROGRAM/PROJECT.**
3. **BALANCE SHEET OR STATEMENT OF FINANCIAL POSITION.**
4. **INCOME AND EXPENSE STATEMENT OR STATEMENT OF ACTIVITIES** (must be within the past three months). Provide the Statement of Activities in a budget-to-actual format if the organization uses that format.
3. **YEAR-END FINANCIAL STATEMENTS or AUDIT.**

Include the most recent fiscal year-end financial statements, audited if available. If the organization has an audit, but it is not available for the most recent fiscal year-end, also include the most recent audit.
4. **MAJOR CONTRIBUTORS.** For the previous two fiscal years, list major contributors (foundations, businesses, government, individuals) with amounts. Do not include names of individual donors.
5. **IN-KIND CONTRIBUTIONS.** Summary of significant in-kind donations (donated goods and professional services) received by the organization for the last fiscal year.
6. **BOARD OF DIRECTORS LIST.** Include the following information for each board member:
 - Position(s) on the board (officer and committee positions)
 - City or county of residence
 - Occupation and name of employer and/or affiliation(s)
 - Term end date for each board member
7. **LIST OF NAMES AND QUALIFICATIONS OF KEY STAFF,** including length of service with the organization. *Do not* include job descriptions or resumes.
8. **PROOF OF IRS FEDERAL TAX-EXEMPT STATUS,** also called a Letter of Determination.
9. **CERTIFICATE OF GOOD STANDING** from the Colorado Secretary of State.



If using a Fiscal Agent/Fiscal Sponsor, include these documents for the fiscal agent or sponsor as well.

1. **THE MEMORANDUM OF UNDERSTANDING** or the contract between the organization and the fiscal agent/fiscal sponsor.
2. **FINANCIAL ATTACHMENTS** listed above for fiscal agent/fiscal sponsor.
3. **PROOF OF IRS FEDERAL TAX-EXEMPT STATUS** for the fiscal agent/fiscal sponsor, preferably dated within the last five years.
4. **BOARD OF DIRECTORS LIST** for the fiscal agent/fiscal sponsor.