

Hardin County Community Endowment Foundation Grant Application - 2018

****Required materials may be mailed and postmarked no later than Friday, February 2nd, to the Hardin County Community Endowment Foundation, Box 473, Iowa Falls, IA 50126. Applications may also be delivered to the Auditor's Office at the courthouse in Eldora or the Hardin County Extension Service Office in Iowa Falls by 4:00 p.m. on Friday, February 2, 2018.****

ORGANIZATIONAL INFORMATION:

Formal name of organization (as listed with IRS) _____ Date _____

Project Title _____

Describe your project in two to three sentences. _____

Project Chair/ grant contact person _____ Phone number _____

Project Chair's complete mailing address _____ E-mail _____

Type of funding sought (check one): **Capital Based _____ **Program Based _____
**If seeking funding for Capital Based, does your organization own the property for which capital support is being requested? Yes _____ No _____ If no, who is the owner?
Name _____ Phone number _____

Project focus area (check one): *Arts/Culture/Humanities* _____ *Education* _____ *Environment/Animals* _____
Health _____ *Human Services* _____ *Public/Society Benefit* _____

Total cost of specific project for which you are requesting an HCCEF grant: \$ _____ ** (attach required budget)

Amount requested from HCCEF for this project: \$ _____
** (Request may not exceed 50% of total project cost, with a maximum of \$10,000.)

Federal tax identification number (EIN) _____ (please leave blank if using fiscal sponsor as described below)

Is your organization an IRS 501(c) (3) nonprofit? Yes _____ No _____
If no, is your organization a 170(c) (1) unit of government? Yes _____ No _____

If you are **NOT** a 501(c) (3) or 170(c) (1), you must have a fiscal sponsor. Please fill out information below:

Fiscal Sponsor _____
Address _____
Phone Number _____ Fiscal Sponsor's EIN number _____

The undersigned certifies that he/she is authorized to represent the organization applying for a grant and that the information contained in this application is accurate. The undersigned agrees that if a grant is awarded to the organization:

- the grant will be used for the purpose outlined in the grant award letter and may not be expended for any other purpose without prior written approval from Hardin County Community Endowment Foundation (HCCEF)
- HCCEF has received nothing of material value in exchange for the grant
- information about the organization and the grant may be used by HCCEF in any published materials

Board Approval from Applicant Organization:

We approve submission of this grant request and certify that the purpose of this request is charitable and that monies received from HCCEF will be used solely for the project as stated in this application.

Project Chair Signature _____

Date _____

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Please address the following discussion points in this application. Limit your answers to no more than two pages total.

- 1) Outline your organization's charitable purpose, its program activities, and the population it serves.

- 2) Describe your organization's history (year it was organized) and major accomplishments, concentrating on the last two years.

- 3) How will your project improve the quality of life in your community? Identify the needs/problems that you are addressing by your proposed project.

- 4) Provide details about your project. Also, identify which geographic community (ies) in Hardin County will benefit from this project. What is the date of completion? Is this a one-time project? If not, describe the long-term plan for sustainability of the project.

- 5) Indicate the impact of this project to your community in a measurable way. (How will you evaluate whether your project has been a success?) Include how news of your project and the partnership you are forming with HCCEF will be publicized and/or recognized.

- 6) Describe the concrete ways that your community supports your project.

- 7) Please list the past grants you have received from HCCEF, title of project, year awarded, and dollar amount.