

**SHERMAN COUNTY COMMUNITY FOUNDATION, INC.
GRANT APPLICATION**

Date _____

Organization Name: _____

Address _____

Telephone _____

Current IRS 501 (c)(3) Yes _____ No _____ Explain _____

Chief Executive Officer _____ **Email** _____

Contact Person _____ **Email** _____

Year Organization Started _____ **# of Staff** _____ **# of Volunteers** _____

Organization Web Site _____

Name of Project _____

Project Type Arts and Culture _____ Basic Needs _____ Children and Youth _____
Community Enrichment _____ Community Health _____ Education _____

How Will the Funds Be Used? _____

Funding Period From _____ to _____

Proposed number of people directly served by this project in Sherman County _____

Amount Requested \$ _____

Total Project Cost \$

If funded, how will your organization recognize sources of support:

Please give a 2-3 sentence purpose and summary of the request here:

_____ **Date** _____
Group Representative Signature

Program Narrative (Not to exceed three pages)

Your program narrative should address the following items in the order they are listed below. Number each response and write the bolded portion of each question before your response. Be sure to answer with complete sentences.

1. Brief **Description of the Organization or Group** -when founded, location, type of clients served, number served and your mission statement.
2. **Project Description** -how it will be implemented, number of people estimated to be served, and program location and the value added to the community if funded. If you are requesting funds for an existing program, explain how you know the current program is effective and how requested funds will enhance the program. Capital projects should include diagram of plan and location.
3. **Expected Results/Outcomes** of this proposed program/project.
4. Briefly explain how you will **Evaluate the Effectiveness** of the program/project.
5. **Organizational Capacity**(existing resources and membership) to implement proposed program/project. Additionally, explain what collaborative relationships, if any, the organization has with agencies or programs that address similar needs/problems.
6. Describe **Plans For Obtaining Other Funding** needed to carry out the project/program, including amounts requested of other contributors or entity (direct and in-kind-please be specific if you have been turned down for funding from another source, giving source and date and, if known, the reason for the denial). If the project/program is expected to continue beyond the grant period, describe plans for ensuring continued funding after the grant period.
7. Briefly **Explain Your Budget Request**, how funds will be used and if they will be leveraged with other funds. Include a description of income and expenses related to this project, even if they exceed the amount requested of the SCCF. List all sources of income and expenses of the entire program including requested with funding and existing budgets. This section should include your funding plan for continuation once SCCF funds have been expended as well as the impact partial funding of the request will have on the program. In order to answer this question, feel free to include a brief (one or two paragraph) budget narrative.

Grant application and materials are to be sent to:

Sherman County Community Foundation, Inc
P.O. Box 35
Loup City, NE 68853

Application Procedure

The Foundation will review requests quarterly with deadlines for grant applications on **January 2, April 1, July 1, and October 1**. When the due date falls on a Saturday or Sunday, grant applications will be due the Monday immediately following. Applicants are encouraged to contact the Sherman County Community Foundation, Inc prior to submitting a proposal to discuss the appropriateness of the request.

Checklist: These items must be included with your grant application and should be provided in this order. Please submit the original and two (2) sets of the following information.

_____ Cover Sheet

_____ Project narrative, not to exceed three pages

_____ Organizational Budget

_____ Program/Project Budget

_____ List of Current Board of Directors or Government Board

_____ If you have received funds from the SCCF within the last three years, describe your organizations most important achievements with the most recent grant award.

_____ IRS 501 c (3) letter, if applicable, when applying for a SCCF grant for the first time.