Edgar County Community Foundation, Inc.

For Good, Forever, For Edgar County

Grant Application to the Edgar County Community Foundation

Application Date

_____

Application Cover Sheet

Organization_____

Address_____

Contact person_____

Daytime phone_____**Fax**_____

Email_____

Project name_____

Targeted audience_____

Targeted age group_____

Targeted location_____

Total project budget $_____

Amount requested $_____

1) Give a brief one sentence summary of your request:

_____

2) Now give a brief narrative of your request, including an assessment of need and primary beneficiaries, plans for implementation, other sources of funds and means of assessing results. Please include a brief statement describing the organization's history, activities, service information, objectives and purposes. Please limit to less than 200 words & should be _presented on your organization's stationery_

3) Submit a line-item budget for the project including the amount of organization's own funds that will be applied to the proposed project. Also, list other sources of funds for this project.

4) Provide the names and titles of all paid individuals working for your organization along with a list of board members.

5) Provide a brief financial report of the organization, including current balance sheet, revenue sources and expenses for the latest fiscal year and any endowment funds held by the organization.

6) Provide a copy of your IRS letter on 501 (c) 3 tax exempt status.

7) Submit a list of grants received in the past two years relating to this request. Please include sources and amounts.

Inclusion and diversity report

The Edgar County Community Foundation strives to serve the diverse population of Edgar County. This includes ethnic variation and skill levels. We recognize and accept the unique needs and challenges of our communities and strive to remain sensitive to the full range of issues facing the residents of Edgar County.

We value the information you share with us to help evaluate additional needs within the Edgar County community. Therefore, it is important that you to provide information about the population served by your project. Please provide as accurately as possible the following information:

% of non-Caucasian population served: _____
%Age diversity: 0-5 ____
                        6-12_____
                        13-18 ____
                        19-29 ____
                        30-50 _____
                        50-65 _____
                        over 65 _____

Is there any other information you would like to share with us about the unique needs of your request? If so, please list include them in your application.

Application Checklist

The following items **MUST** accompany this grant application. Please mark the boxes in the "included" column for each item submitted.

Checklist	Included
1. **Completed Grant Application Cover Sheet and Checklist.**	☐
2. **Project Description (A brief narrative** describing the project **and/or program for which funding is being requested, including an assessment of need and primary beneficiaries, plans for implementation, other sources of funds and means of assessing results. Please include a brief statement describing your organization's history, activities, service information, objectives and purposes.**	☐
3. **Detailed line-item budget of the project including the amount of organization's own funds that will be applied to the proposed project.**	☐
4. **List of the name and title of all paid individuals working for your organization.**	☐
5. **List of board members.**	☐
6. **A brief, one-page financial report of the organization, including current balance sheet, revenue sources and expenses for the latest fiscal year and any endowment funds held by the organization.**	☐
7. **IRS letter on 501 (c) 3 tax exempt status**	☐
8. **List of grants received in the past two years relating to this specific request. Please include sources and amounts.**	☐

The Edgar County Community Foundation
Grant Process & Philosophy

Focus

The Edgar County Community Foundation (ECCF) accepts grant applications from nonprofit organizations within Edgar County who seek funds: to launch innovative social initiatives for capital or equipment improvements and to support the creation of needed new programs. The ECCF, a 501 (c) (3) organization, is a community-based nonprofit foundation whose programs benefit the residents of Edgar County.

Grant Requests

Grant applications will be accepted for initial review by the ECCF grant committee. Projects will be funded for one time. Our intent is to provide seed money for new ideas. The Foundation generally will not fund a request at 100 percent.

Application Questions

Please contact **Christian Colvin**, director of grants, at **1 (217) 251-7669** or via email at **christian.colvin@gmail.com** with questions concerning the grant program, the application process, and program category selection.

Grant Guidelines Process

When applying for a grant please note the following:

- **Only one application per organization may be submitted within any calendar year**

- **Applications may be submitted for existing or new projects.**

- **Priority will be given to organizations which deliver effective programs, assist underserved populations, offer new approaches to solving problems, or create opportunities for organizations to collaborate.**

- **Grants are awarded one time only.**

- **Applications that do not contain all the requested information may be denied**

- **Applications will be accepted into the program category that best fits the specific program for which funds are being requested**

Project Review/Reporting/Accountability

One month following project completion, a final written report, including an expenditures report must be submitted to the ECCF Board. The ECCF Board may conduct a final field evaluation of project outcomes. Funds not expended must be returned to the ECCF at the time of the final report. The ECCF Grant Committee and the Board of Directors may, at their discretion, conduct periodic field evaluations.

Certification:

In submitting this application, the applicant agrees to the following:

1. The applicant will spend funds solely for the purposes stated in the application and will refund the unexpended portion of such funds, if any.
2. The applicant understands that ECCF, in researching this grant application will review all of the information submitted, and may request additional information if necessary, before a determination is made.
3. Incomplete proposals will not be considered.

_____   _____

(Officer, Manager or Director)   Date