CLAY COUNTY COMMUNITY FOUNDATION

AN AFFILIATE OF THE COMMUNITY FOUNDATION OF GREATER DES MOINES COMMUNITY BETTERMENT GRANT APPLICATION COVER SHEET

CLAY COUNTY COMMUNITY FOUNDATION COMMUNITY BETTERMENT GRANT APPLICATION PROJECT DESCRIPTION

In one page <u>or less</u>, describe your proposed project. What do you plan to do, and why? Where and when? Who will be responsible for carrying out the proposed project?

CLAY COUNTY COMMUNITY FOUNDATION COMMUNITY BETTERMENT GRANT APPLICATION ADDITIONAL NARRATIVE

Please provide the following information in the space provided:

1. Applicant's Ability to Carry Out Project

Does applicant have a record of effective service? Is the applicant qualified and prepared to take on the proposed project? Is there broad community support (volunteers and financial) for the project?

2. Need and Impact:

What need, problem or issue will be addressed by the project? How was the need identified? Does the proposed project address one or more of the Clay County Community Foundation's prioritized needs? (If so, which ones?) What other resources are available to fund or undertake the project? What other funding sources have been considered and explored? Why is a CCCF Community Betterment Grant needed to make this project happen? What will be the result of this project? Describe the individuals impacted by this project. How will Clay County communities be enhanced or improved by this project? What other future spin-off effects are anticipated?

3.	Budget: How much is being requested from CCCF for this project? What is the total cost of the project? What is the source of other funds being provided for this project? Is the budget realistic? Is the funding amount requested appropriate?

4. Evaluation and Sustainability:

What are the expected outcomes of this project? How will those outcomes be measured? Will this be a one-time event, or an on-going project? If it is intended to be on-going, how will it be sustained?

CLAY COUNTY COMMUNITY FOUNDATION COMMUNITY BETTERMENT GRANT APPLICATION SUPPORTING DOCUMENTS

<u>Supporting Documents:</u> <u>One</u> complete set of attachments must accompany the original application that is to be mailed to the following address:

CCCF Administrative Office c/o Community Foundation of Greater Des Moines 1915 Grand Avenue Des Moines, IA 50309

REMEMBER TO PRINT A COPY OF THIS FORM (COVER PAGE, PROJECT DESCRIPTION, AND ADDITIONAL NARRATIVE PAGES) AND OF EACH SUPPORTING ITEM BELOW AND MAIL TO THE DES MOINES OFFICE AT THE ADDRESS ABOVE.

- Current Copy of IRS Determination ruling letter, unit of local government verification letter, or Fiscal Sponsorship Agreement form.
- Names and titles of organization leadership, including trustees, directors, board officers and key staff personnel.
- o Organization's current operating budget, including a list of principal sources of income.
- o Most current monthly financial statement.
- Most recent year-end financial statement. (If available, <u>one</u> copy of audited statement should be attached to the original application.)
- o (Optional) Any attachments that will help clarify organization's credibility or intent of project.

If the deadline falls on a weekend or holiday, the deadline is the first working day after January 15.