

**2016 HIGH POINT COMMUNITY FOUNDATION  
GRANT APPLICATION COVER SHEET**

Legal name of organization applying:

Federal Tax ID Number:

Current Total Annual Operating Budget:

Executive Director:

Phone number:

Contact person/title/phone number (if different from executive director)

Address (principal/administrative office):

City/State/Zip:

E-mail Address:

List any previous support from HCPF Annual Grants in the last 5 years:

Project Name:

Purpose of Grant (one sentence):

Amount Requested:

Total Project Cost:

Geographic Area Served:

Dated Signature of Nonprofit Executive Director and Board Chair

Or

Dated Signature of School Principal and District Superintendent

Or

Dated Signature of Municipal Department Head and City Manager

Or

Dated Signature of Church Pastor and Chair/Head of Finance/Stewardship Committee

**This application is due at the office of HPCF by 5:00pm on August 17<sup>th</sup>, 2016  
No postmarks will be honored  
Applicants who are awarded grants for two consecutive years must take a year off.**

## Grant Application Format

Please provide the following information as listed.

Use the provided headings and numbers in your own word processor, thus leaving flexibility for the length of the responses, but no less than in 12 font format.

You are allowed to submit the cover page and five additional application pages which are to be stapled together do not paper clip. Any applications exceeding the allowed number of pages will be automatically rejected. Only one copy of the attachments are required. Do not submit any other materials.

If your application involves multiple organizations, all executive directors must sign the cover page by adding additional lines as necessary.

1. **Organization:** Please state the mission and goals of your organization.
2. **Need:** Please state the needs/problems to be addressed, description of the target population including numbers and geographic area, and how they will benefit.
3. **Program Objectives:** Please state the program goals - what does this program hope to accomplish.
4. **Method:** Please state the plan to implement the program including the specific sequence of activities necessary and a timetable stating when the program will begin and end.
5. **Personnel:** Describe the qualifications of key staff and volunteers that will ensure success of the program – please detail any specific training involved.
6. **Coordination:** Acknowledge similar existing projects, if any, and explain how your proposal differs. If you project involves direct coordination with another organization(s), please give details about each organization's responsibilities and how the grant will be used by all involved if the money is given to one organization.
7. **Evaluation:** Please describe how success will be defined and measured. Please note that this will be required to be reported back to the Foundation as part of the review process. Reviews will take place in August and you will be asked to present the results of your grant use to the review committee.

8. **Budget:** Use the **Grant Budget Format** that follows and prepare the program or capital budget.

### **Program Revenue**

HCPF Funding request  
Local, State, Federal Gov't Funding  
Foundation Funding  
Corporate Funding  
Income from tickets or fees  
In-Kind Support  
Other

Total Revenue

### **Program Expenses**

Salaries  
Payroll Taxes & Benefits  
Insurance  
Supplies  
Rent  
Utilities  
Marketing  
Printing  
Postage  
Travel  
Telephone

Total Expenses

The Total Revenue and Total Expenses should be the same number  
Please add any categories that apply to your program and only use the number of lines you need. ***The budget does not have to be on a separate page.***

9. **Explanation Paragraph:** Please explain how the program or project will be accomplished if the total amount requested is not awarded.
10. **Sustainability:** Please provide your plan for the continuation of the project or program once the grant award has been spent.

**Attachments: (only one copy of each – these will not be returned)**

- A copy of the IRS Determination letter indicating 501(c)(3) tax-exempt status.
- List of Board of Directors.
- Current Annual operating budget, including expenses and revenue.
- Most recent annual financial statement per following requirements:
  - ❖ Grant applicants having an annual budget of \$100,000 or less are not required to submit a report by an independent CPA.
  - ❖ Grant applicants having an annual budget of more than \$100,000 but less than \$200,000 should attach financial statements with a compilation report by an independent CPA.
  - ❖ Grant applicants having an annual budget of \$200,000 or more but less than \$400,000 should attach financial statements with a review report by an independent CPA.
  - ❖ Grant applicants having an annual budget of \$400,000 or more should attach financial statements with an audit report by an independent CPA.
- Copy of IRS Form 990 prepared and signed by an independent CPA and signed by an authorized member of your organization filed with the IRS.  
**Caution: Most returns are now being electronically filed. Be sure you have proof of filing by a CPA along with the Form 8879 signature authorization for electronic filing.**