**Hartford Greater Together Community Fund**

**Grant Application Form**

The Hartford Greater Together Community Fund is pleased to announce a competitive grant opportunity, offering grants of $500 to $5,000 to benefit the residents of Hartford. All interested applicants must complete an application, due by 11:59 p.m. on April 30, 2021.

**Eligibility**

* Organizations must be classified as a 501(c)(3) non-profit.
* Organizations may have a fiscal sponsor.
* Organizations must have an annual operating budget of $1 million or less.
* Funding must benefit residents of Hartford.
* Organizations need to be based in Hartford.

**Guidelines**

* The maximum grant award is $5,000, minimum grant is $500.
* Funds may not be used for lobbying or any political activity.

**Cycles**

* There will be two grantmaking cycles. In each cycle, the Fund will award up to $25,000 in total.
* Cycle 1: Applications due April 30; awards announced by June 1; grant funds issued by June 30.
* Cycle 2: Applications due October 1; awards announced by November 15; grant funds issued by

December 15.

* Beginning from date of grant fund disbursement, awardees have one year to complete the project.

**Categories**

* For cycle 1, applicants must operate in one of the following areas: Housing, Education, or Food Insecurity.
* For cycle 2, applicants must operate in one of the following areas: Health, Criminal Justice,or Child Care.

**Application Process**

* Please email completed applications to hartfordgreater2gether@gmail.com.
* Please answer all of the questions below and include all of the required attachments.

**Required Attachments**

* A detailed line item program budget of all revenue sources and expenses.
* IRS 501(c)(3) letter.
* Organizational operating budget of the most recent fiscal or calendar year.

**Optional Attachments**

* Letters of support, up to 3 maximum.
* Other attachments (e.g., marketing materials, photographs, etc.).

**1) Organization Contact Information**

|  |  |
| --- | --- |
| Organization or Community Group’s Legal Name: |           |
| Fiscal Sponsor, if applicable: |       |
| Address: |           |
| Address 2: |            |
| City, State, Zip Code: |          |
| Contact Name & Title: |           |
| Contact Phone Number: |         |
| Contact Email: |          |
| Website, if applicable: |          |
| Organization’s Annual Budget: |       |

**2) Program Information**

|  |  |
| --- | --- |
| Program/Project Title (or note funds are for operational support): |        |
| Dollar Amount Requested:  |         |
| Total Project/Program or Operational Budget |       |
| Geographic Area Served: *(neighborhoods or entire town)* |       |
| Population Served:*(e.g. age, gender, ethnicity, number of participants*) |       |

**3) Description of Organization**

a. **State the mission of your organization**.

(250 word maximum)

 b. **Provide a brief history and a summary of programs/activities**.

(250 word maximum)

**4) Program/Project Description**

a. **Please briefly describe the program or activity. How do you plan to use the funds? Who is the project leader(s)? How will you market your program, if applicable?**

(500 word maximum)

b. **How does this project align with your mission?**

(250 word maximum)

**5) Description of Need and Impact**

a. **Why is the project you describe necessary at this time? What are the expected benefits for the organization and the targeted community?**

(500 word maximum)

**6)** **Targeted Audience**

a. **Describe the demographics of the audience served by your project.**

(250 word maximum)

**7) Evaluation**

a. **How will you evaluate the project? What metrics will be used to determine the success of the project?**

(250 word maximum)

**8) Board of Trustees Demographics**

a. **Are any of the underrepresented identities listed below reflected among your organization’s board**

**and leadership staff? Check all that apply.**

[ ]  Black/African American
[ ]  Hispanic/Latinx
[ ]  Asian and/or Pacific Islander
[ ]  Native American/Indigenous
[ ]  Women
[ ]  Immigrant and/or non-native English speakers
[ ]  LGBTQIA+
[ ]  Persons with disabilities
[ ]  Other

b. **Are there other underrepresented identities reflected in your organization’s leadership that you would like to include? Please specify.**

*Please contact* **hartfordgreater2gether@gmail.com** *with any questions*