**Simsbury Greater Together Community Fund**

**Formal Request for Funding**

**Grant Application Form**

**Application Deadline: June 30, 2023**

**Date:**

**Organization Information**

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| Name of Organization: |
| Legal Name (if different): |
| Mailing Address: |
| Employer Identification Number (EIN) |
| Phone |
| Fax |
| Website |
| Name of CEO/Executive Director |
| Title  Phone |
| Email |
| Name of Contact Person (Regarding this Application)  Title  Phone |
| Email |
| Is your organization recognized by the IRS as 501(c)(3)  Nonprofit Serving Simsbury Connecticut? |
| If no, is your organization a public agency/unit of government? |

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| If no, list the name and address of your organization’s fiscal agent: |

|  |
| --- |
| Fiscal Agent's EIN # |

**Proposal Information**

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| Proposal Title: |
| Provide a 2-3 sentence explanation of your proposal: |
| Population Served: |
|  |
| Funds are being requested for (check one):   * + New Project/Program   + Improved Access to Current Program   + Enhancement of Current Program   + Other (specify): |
| Project Dates (if Applicable): |
| Fiscal Year End: |
| Dollar Amount Requested: $ |

Total Annual Organization Budget: $

Total Project Budget: $

|  |
| --- |
| Governance/Organizational Diversity Information  Are there any under-represented identities listed in your board or leadership staff? Select all that apply:   * + Black/African American   + Native American/Indigenous   + Veterans   + Hispanic/Latino   + Women   + Persons with Disabilities   + Asian/Pacific Islander   + Immigrants/Non-Native English Speakers   + LGBTQIA+ |

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| --- |
| Other (specify): |
| The following question is optional. Your response will help SGT quantify its giving to minority led organizations, to assess how equitably foundation dollars are invested.  Is your organization minority-lead\*? Yes No  \*For the purposes of this proposal, the term “minority-led” refers to organizations in which the executive director or other senior leadership that play a similar role (i.e., artistic director) represent racial and ethnic minority populations. |

Authorization

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**PROPOSAL NARRATIVE**

Use the following outline as a guide to your proposal narrative.

Limit narrative to five (5) pages. Use headings.

I. Organization Information

1. Brief summary of organization history, including the date your organization was established.
2. Brief summary of organization mission, goals, and key programming achievements.

II. Purpose of Grant

1. Project description (include the objectives, estimated number served and frequency).
2. The opportunity, challenges, issues or needs that your project addresses.
3. Describe the target population to benefit.
4. Layout the specific execution and timeframe in which this initiative will take place.
5. Additional organizations collaborating in this effort, if applicable.
6. How will the proposed activities benefit the Simsbury community, being as clear as you can about the impact you expect.
7. Will Simsbury residents or outside parties from your organization be involved in implementing this project? If so, how?
8. How long the project will benefit Simsbury (e.g., for a fixed length of time or will this create a permanent program for the town.)
9. What are the resources and long-term funding strategies (if applicable) for sustaining this effort successfully?

III. Evaluation

1. Describe your criteria for success.
2. How will you measure and track results?
3. How are your results communicated and distributed?

**Attachments**

ALL THE FOLLOWING ATTACHMENTS MUST ACCOMPANY THE PROPOSAL

1. Copy of IRS determination letter and/or explanation of your tax exempt-status.
2. Current Board membership list and their affiliations.
3. Total board approved organizational budget for the fiscal year
4. Detailed project budget (use the common budget worksheet provided)