



***COMMUNITY NEEDS  
GRANT APPLICATION***

Complete this application and return the **original plus six copies (total of 7 collated copies)** to the Community Foundation of Kankakee River Valley, 105 E. Court St, Kankakee, IL 60901, delivered by 4:00 pm Monday, **February 1**. Print neatly or type. For questions, please phone the Community Foundation at 815-939-1611.

Name of Organization: \_\_\_\_\_

Contact Person/Title: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

Please list any grants the Community Foundation has awarded to your organization since 2006(if applicable). (Most recent first):

Year of Award	\$ Amount	Briefly describe the purpose of the previous grant award.


Please provide an abstract (50 words or less) of your current grant request below:

Project/Purpose of Current Grant Request:	
Anticipated Project Dates: From:	To:
Total Project Cost: \$	Amount Requested from the CF: \$
Target population (including demographics) served by the project:	
Approximate number of County residents directly served by this project/purpose:	

Please be advised that the Community Foundation of Kankakee River Valley requires an end-of-project summary report of results and outcomes, and failure to submit a report may preclude applicants from consideration for future funding. The end-of-project summary should address the application criteria and is limited to 3 pages according to Community Foundation submission standards. The signature of the applicant representative below acknowledges and accepts these conditions.

\_\_\_\_\_  
Signature, Chairperson, Board of Directors

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature, Executive Director, Principal Agent

\_\_\_\_\_  
Date

## *Project Description*

Please describe your proposal in narrative form by attaching 5 single-sided pages or less on 8½”x11” paper observing 1” margins, double spaced 12 point type addressing all the selection criteria listed below:

1. General description of the project
2. Target population to be served
3. Project objectives
4. Need for the project
5. Activities planned to meet objectives
6. Project time schedule
7. Expected benefits and outcomes of the project
8. Specific purpose of funds requested
9. Qualifications of key personnel involved
10. Plans for future funding of the project
11. If collaborative, details of collaboration

## *Project Budget*

Please list all expenses (including those already incurred) and funding (including monies already received) associated with your proposed project. If applicable, please include in-kind donations/non-cash support. Total expenses (Line 10) should not exceed total project funding request (Line 17).

A. **Project Expenses** - Include a description and the amounts of all costs associated with your project. Be specific. For each expense, please label the funding source supporting that expense as either **CF** (Community Foundation) or **Other** (Other source).

<i>Description of Expenses</i>	<i>CF Request \$ Amount</i>	<i>Other \$ Amount</i>
1	\$	\$
2	\$	\$
3	\$	\$
4	\$	\$
5	\$	\$
6	\$	\$
7	\$	\$
8	\$	\$
9	\$	\$
10 <i>Total Project Expenses (sum of lines 1-9):</i>	\$	\$

B. **Project Funding** - Include the source and amount of all funding for your project. Also, please indicate **R** (Received), **C** (Committed, but not yet received), or **A** (Applied for) for each amount. Funding sources could include grants, donations, fundraising income, allocated internal funds, etc.

<i>Funding Sources</i>	<i>\$ Amount</i>	<i>R, C, or A</i>
11 <b>CF Grant (Amount requested in this application)</b>	\$	<b>A</b>
12	\$	
13	\$	
14	\$	
15	\$	
16	\$	
17 <i>Total Project Funding (sum of line 11-16):</i>	\$	

***Community Foundation-Needs Grant Application  
Required Attachments***

- Most current Federal IRS determination letter indicating non-profit status  
*(First time applicants only - 1 copy only)*
- Organization Case Statement - Include mission statement, brief history of the organization, services provided, the total number of County residents served annually, and any additional accomplishments. *(Required - 7 copies total)*
- List of Board of Directors/Trustees *(Required - 7 copies total)*
- Current annual organizational operating budget *(Required - 1 copy only)*
- Copy of latest financial statements (*i.e. Form 990 or Audit*), including financial statements of any affiliated Foundation. Note - This attachment does **not** apply to municipal government or public education institutions. *(Required - 1 copy only)*
- If this project is collaborative in nature, please include a letter of support or collaboration agreement from each of the key partners in the project *(Required - 7 copies total)*
- Photos and/or additional support material *(Optional - 7 copies total)*
- End-of-project report due prior to December 31, 2010

*For office use only*

Date Received by Community Foundation: \_\_\_\_\_

Committee Review: \_\_\_\_\_ Signature: \_\_\_\_\_