TIER TWO:

$1,500-$10,000 (project expenses only)

*Organizations may submit one grant application per grant cycle

GRANT APPLICATION PROCEDURES

GRANT APPLICATION CHECKLIST

(Your Grant Application package must contain the following)

- ☐ Completed Cover Sheet and Signed Application
- ☐ Written Narrative
- ☐ Grant Project Budget (With Format Provided and In Order)
- ☐ Completed Required Attachments (See List)

Note: Electronic transmission of your Grant Application Package to grants@southhavencf.org is required and will be acknowledged within 15 days.

The South Haven Community Foundation will only consider grant applications (1) from 501(c)(3) nonprofits recognized by the Internal Revenue Service or from school systems or municipal governments; (2) for projects within our service area that meet one or more of the Foundation's Priorities: Education, Economic Development, Arts, Culture; and (3) are complete and timely.

Submit to South Haven Community Foundation by March 15 of each year.

GRANT APPLICATION COVER SHEET

DATE OF APPLICATION:_____

NAME OF ORGANIZATION:_____

- Mailing address: _____
- Physical address: _____
- Organization email: _____
- Web Address: _____
- Telephone: _____
- Fed EIN: _____
- Mission: _____

  _____
- Geographic area served:_____
- Is Applicant a 501(c)(3) organization, school or a governmental entity? ___

  If "NO" application cannot be considered.

CONTACT PERSON:

- Name/Title: _____
- Email: _____
- Cell phone: _____
- Approved by Executive Director or Board Chairperson ___yes ___no

PROPOSED PROJECT:

- Project Name:_____
- Summary: _____

  _____

  _____

  _____
- Project dates: Start_____ Finish_____
- Amount requested:_____
- Total project cost: _____

REQUIRED ATTACHMENTS in addition to this completed application:

Nonprofit organization must submit:

- 501(c)(3) determination letter from IRS (only if first time applicant)
- MI Certificate of Good Standing (within 90 days of Grant Application)
- Most recent Annual Financial Statements(Balance sheet & Income Stmt)
- Applicant's Officers and Directors
- Applicant's Organizational Chart
- Media Release Consent Form Authorization (Provided and Optional)

Units of Municipal Governments and School Systems must submit:

- List of Board Members
- Current Year Operating Budget
- Media Release Consent Form Authorization (Provided and Optional)

List previous SHCF grants received in the past 5 years and name of project.
Note: Final Report must be received for prior grant year before application will be considered.

Year	Project and grant amount
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Requirements after grant request is approved:

The Foundation will be acknowledged on all project related material
A Final Report to be submitted by January 31 of the following year

APPLICANT SIGNATURE _____
DATE OF APPLICATION _____

GRANT APPLICATION FORMAT
(ATTACH WRITTEN NARRATIVE)

SUMMARY

- What is the purpose of proposed grant?
- How does the project address the need in the community?
- How does the proposed grant specifically relate to one or more of SHCF's priorities: Education, Economic Development, Arts, Culture?

PROJECT

- Project description including target audience and number of participants
- Project goals and measurable objectives
- Project action plan including program components, activities, timeline
- Note if other community organizations are currently doing similar projects
- Collaboration with other organizations.
- Evaluation of project to determine impact
- Describe sustainability of project or indicate if it is a one-time project
- Qualifications of staff/volunteers to ensure project success
- Budget narrative describing costs

PROJECT BUDGET

- Complete Grant Application Budget form.
- If full amount of grant request is not funded, identify priority items.
- If grant request is not funded, will project proceed? If so, list financial resources.

GRANT PROJECT BUDGET FORMAT *Please provide the project budget in this format and in this order.*

Organizational fiscal year:_____

Time period this grant budget covers:_____

For a CAPITAL request, substitute your format for listing expenses. These may include: architectural fees, land/building purchase, construction costs, and marketing expenses.

Project Expenses: Provide the project costs for each of the applicable budget categories. Please detail total project costs and requested amounts. (Salaries, fringe benefits and overhead costs are ongoing business expenses not directly attributed to this grant request).

Budget Categories	Requested Amount	Total Project Cost
Contractor/Consultant	$_____	$_____
Equipment	$_____	$_____
Supplies	$_____	$_____
Printing and Copying	$_____	$_____
Advertising	$_____	$_____
Other (specify)	$_____	$_____
	$_____	$_____
	$_____	$_____

Total amount **$_____** **Total project costs** **$_____**

Revenue: include a **description and the total amount** for each of the following budget categories, in this order; please indicate which sources of revenue are committed and which are pending.

	Committed	***Pending***
1. **Grants/Contracts/Contributions**		
Local Government	$_____	$_____
State Government	$_____	$_____
Federal Government	$_____	$_____
Foundations (itemize)	$_____	$_____
Businesses (itemize)	$_____	$_____
Service Organizations (itemize)	$_____	$_____
Individuals	$_____	$_____
Other (specify)	$_____	$_____
	$_____	$_____
2. **Earned Income**		
Program Events	$_____	$_____
Program Publications &	$_____	$_____
Products	$_____	$_____
3. **Membership Income**	$_____	$_____
4. **In-Kind Support**	$_____	$_____
5. **Other (specify)**	$_____	$_____
	$_____	$_____
Total Revenue:	**$**_____	**$**_____

MEDIA RELEASE CONSENT FORM AUTHORIZATION

The South Haven Area Community Foundation (Foundation) may take the opportunity to share the great work of your organization on our website, in marketing materials and on other electronic media.
This may include, but is not limited to, photos, video and descriptions.
Please sign this document below and include it with your Grant Application if you choose to provide your consent.

a. The Applicant authorizes the Foundation to use any information or media (including photographs) provided with this Application or provided at a later date to the Foundation, in compliance with post-grant report requirements, in the Foundation's publications, including web-based publications and social media posts, without payment or other consideration;
b. The Applicant agrees to indemnify, defend and hold the Foundation harmless from any liability, loss, damage, cost, or expense (including reasonable attorney fees) based on any claim, demand, suit, or action by any person or entity raised against the Foundation related in any way to the grant that may be provided by the Foundation to the Applicant, including the Foundation's use of information or media provided by the Applicant to the Foundation;
c. The Applicant acknowledges that its receipt of a grant from the Foundation, if awarded, shall be adequate consideration for the terms agreed to herein

APPLICANT SIGNATURE _____
PRINTED NAME & TITLE _____
DATE: _____