



Community Grant Application

The grants committee requests a typed-out application using this form or you can use our online application which will be open on our website one month before grant deadlines. If using this form and responding to check box areas, double click the check boxes and choose default value "checked."

Submission Check List

✓ Review project with Foundation staff prior to submission.	✓ Complete summary page.
✓ Complete grant questions.	✓ Complete/attach a project budget. Attach any estimates of costs (if applicable).
✓ Include list of current board or committee members and contact information.	✓ Sign agreement page.

Section 1: Summary Page

Date:		<input type="checkbox"/> Cycle 1 Due March 1	<input type="checkbox"/> Cycle 2 Due August 1
Organization:		Type of organization (choose one):	
EIN:		<input type="checkbox"/> 501(c)3	<input type="checkbox"/> Government Agency
Contact Name:	<input type="checkbox"/> Fiscal Agent (list):		
Address:			
Email:		Phone:	

Project Title and/or Summary:			
Grant Amount Requested:		Total Project Cost:	
Project Start Date:		Project End Date:	
Funding Priority (check all that apply)	<input type="checkbox"/> Civic <input type="checkbox"/> Education <input type="checkbox"/> Health or Social Services <input type="checkbox"/> Environment <input type="checkbox"/> Arts or Culture		
Have you received a grant from WCF in the past 3 years?	<input type="checkbox"/> no <input type="checkbox"/> yes (please list years known)		



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Section 2: Narrative Requirements

Please address each of the following in less than 500 words:

NEED: Describe the project including what specific community need/opportunity you have identified.

IMPACT: Describe the desired/projected outcomes of this project and how you will measure these outcomes. Give an overview of who and how many people will be served with this project.

COLLABORATION: In what ways are other collaborative partners involved in this project?

In your narrative, be aware of the **criteria** that the committee will use for ranking your application and be sure to address them as you put your application together. Please refer to the grant guideline information for details on the criteria for ranking located on our website.



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Section 3: Project Budget

Please submit a basic budget for this project and any applicable estimates for costs. You can submit your own budget or use our template below.

Is this project possible if your request is only partially funded? Yes No

Comments (optional):

INCOME	Amount	Description (if applicable)
Government Grants		
Foundations (other than WCF)		
Private (Corporations/individuals)		
Membership or Sponsorship Income		
Earned Income (e.g. tickets)		
Other		
TOTAL		

EXPENSES	Amount	Description (if applicable)
Consultants, Staff, Professional Fees		
Equipment		
Office supplies, printing, etc.		
Rent & Utilities		
Other		
TOTAL		

Please share any in-kind donations or volunteer time related to this project.	
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Section 4: Agreement – Signatures Required

In submitting the application, the applicant agrees to the following:

- The applicant will spend funds solely for the purposes stated in the application. The applicant will refund any unused funds or those that are used outside of those purposes. In addition, the applicant will submit a final report, within six months of the project end date, in a format provided by the Foundation, including a financial statement documenting the expenditure of grant funds.
- The applicant realizes that payment of the funds granted will be at the convenience of the Foundation, including cancellation of the grant and/or modification of previously agreed upon payment schedules should such cancellation or modification be deemed necessary by the Foundation.
- The applicant understands that the Foundation, in researching this grant application, may review any and all of the information submitted with advisors of the Foundation's choosing, if deemed necessary by the Foundation.
- The applicant will recognize the Foundation in all appropriate publicity connected to the applicant program.
- The applicant understands that by submitting this application to the Foundation for review, a grant is not guaranteed.

Organization Staff or Executive Director:

Signature:			
Print Name:		Title:	
Date:			