

Introduction

The Quality Community Foundation (QCF) was established in 2006 as a purpose to support and obtain funding for post-secondary education and youth recreational program scholarships offered by and through the city. The QCF also provides grants to fund various non-profit organizations which benefit Commerce City residents. The foundation achieves its purpose by:

- Attracting charitable gifts and promoting community philanthropy,
- Serving as a steward for entrusted funds to support city programs and the programs and activities of economic, educational, social, and cultural non-profit organizations,
- Enhancing the effectiveness of the non-profit community, and
- Being a community resource and providing services to individuals, non-profit agencies, and the community-at-large.

<u>Mission</u>

The mission of the Quality Community Foundation is Building a Quality Community for a Lifetime.

Eligibility and Conditions

- ✓ Applicant must be a non-profit organization and provide proof of 501(c)3 status
- ✓ Grant activities must benefit Commerce City residents
- ✓ This application format must be used. Other formats will not be accepted.
- ✓ All attachments should use 12-point font with 1-inch margins, single spaced.
- ✓ Application due date is January 30, 2015 no later than 4:00 p.m.

• Late applications will not be accepted.

- ✓ Grant reports for 2015 Awards are due January 30, 2015 no later than 4:00 p.m. Returning grantees with late 2014 reports (due January 30, 2015 at or before 4:00 p.m.) will not be eligible for funding.
- ✓ All promotional items purchased with QCF grant dollars must display the QCF logo.
- ✓ All events sponsored by QCF grant dollars must display the banner.

All conditions must be met in order to be eligible for 2015 funds

Grant Components

The Quality Community Foundation Grant Application consists of the following components, which should be submitted in the order listed below. This checklist is provided to help ensure a complete application. Do not submit the checklist with the application. Applicants using Fiscal Agents/Fiscal Sponsors will <u>not</u> be eligible for funding. Each section will be scored to determine final funding recommendations.

- □ Section I: Cover Letter (one page) (5pts.) Include the purpose of the grant request and a brief description of how the request fits with the Quality Community Foundation's mission.
- □ Section II: Grant Application (65pts.)
 - **Mission Statement –** Organizations mission must align with the QCF mission
 - **Organizational Background –** Provide a background of your organization. Include a brief description of the history of the organization.
 - Description of organizations current programs Provide a description of the organizations current programs. Describe how the programs align with the needs of the community.
 - **Geographic Area Served** Indicate the community that will be served. Describe the services that will directly impact Commerce City residents.
 - Plan for the Program/Project Summary Provide a plan that outlines how the program or project will meet the needs of the community. Identify stakeholders and support systems that are in place to address the needs identified.
 - **Explanation of Lack of Available Services –** Provide a description of the services that will be provided and how those services will fulfil a need in the community.
 - **Expected Results** Provide the expected outcome of the program and the factors used to demonstrate success. Identify any barriers that may prevent the desired results and identify a process to mitigate any roadblocks that may be encountered along the way.
 - **Goals and Objectives, Timeline and Activities –** Provide a list of program goals, objectives, activities and timeline for completion.
 - Goals must be measurable, attainable and relevant.
 - Objectives must be measurable and achievable within the timeline provided.
 - Timeline should provide dates and milestones for project activities

- Activities should align with project goals and objectives.
- Evaluation Describe the evaluation process that will be used to track progress towards program goals. Describe how mid-course corrections will be identified and implemented.
- **Collaboration/Partners** Identify other organizations involved in the program/project.
- **Target Population Information –** Complete table.
- Budget and Budget Narrative Complete the Budget Request table by providing expenditures for each category listed. Provide a detailed explanation of how funds will be used. Provide a full breakdown of the costs associated with each item. The narrative should support the budget table.
- **Financial Information** Provide the organization current fiscal year income and expenses.

Section III: Supporting Documentation – Label each attachment and provide in the order listed. Each attachment must be on a separate sheet of paper and all attachments should use 12-point font with 1-inch margins, single spaced. (30pts.)

- **Proof of 501(c)3 status.** Describe anything other than 501(c)3.
- **Financial Statement -** Include revenues and expenses.
- Major contributors For the previous two fiscal years, list major contributors (foundations, businesses, government, individuals) with amounts. Do not include names of individual donors.
- **In-kind contributions** Summary of significant in-kind donations (donated goods and professional services) received by the organization for the last fiscal year.
- Volunteers
- **List of Board of Directors -** Include the following information for each board member:
 - Position(s) on the board (officer and committee positions) including term and date for each member
 - Occupation and name of employer and/or affiliation(s)

- **Proof of IRS federal tax-exempt status also called a Letter of Determination** This letter must be dated within the last five years.
- Anti-discrimination statement adopted by the board of directors.
- List of names and TITLES of key staff, including length of service with the organization.
- **The organization's operating budget for the current fiscal year**. If available, also include the budget for the upcoming fiscal year.

The Quality Community for a Life Time Grant Program will not fund:

- Organizations without a 501c3 status, unless documentation can be provided that demonstrates the application has been submitted.
- Organizations that discriminate on the basis of race, color, religion (creed), gender, age, national origin (ancestry), disability, marital status, sexual orientation or military status except to serve a historically disadvantaged group.
- Salaries, benefits or rent.
- Debt retirement.
- Endowments or other reserve funds.
- Membership or affiliation campaigns.
- Grants that further political or religious doctrines.
- Grants to individuals.
- Medical, scientific or academic research.
- Grants for re-granting programs.
- Capital campaigns.
- Acquisition of tangible personal property unless essential to achieving the grant's objectives.

Pre-application meetings are scheduled for December 16 at 8:00 a.m. and again at 5:30 p.m. You only need to attend one session as both will provide the same information.

ORGANIZATION INFORMATION

| Legal Name of Organization: | | | | |
|--|--|--|--|--|
| | | | | |
| Mailing Address (city, state and zip): | | | | |
| Physical Address, if not confidential (city, state and zip): | | | | |
| Phone: Fax: EIN: | | | | |
| Website: | | | | |
| Organization Email Address: | | | | |
| Name of CEO or Executive Director: | | | | |
| Phone: Email: | | | | |
| Application Contact & Title (if not the CEO or Executive Director: | | | | |
| | | | | |
| Phone: Email: | | | | |
| Year Founded: | | | | |
| Number of Employees: Full-time Part-time | | | | |
| Tax Exempt Status: | | | | |
| □ 501(c)3 □ 0ther than 501 (c)3, describe: | | | | |

| Amount of Request: | | |
|--------------------------|------|--|
| Name of Program/Project: | | |

Section I - Cover Page (5pts)

Must be attached and submitted with the application package.

Section II - Grant Application (65pts)

1. Mission Statement (1,000 characters)

2. Organizational Background (1,500 characters)

3. Provide a brief description of the organization's current programs. (1,500 characters)

4. Geographic Area Served - specific to this application (1,500 characters)

5. Provide a summary of the plan for the program or project request (1,500 characters)

6. Briefly explain the lack of available services and how the program or project will benefit Commerce City population. (1,500 characters)

7. Briefly list the expected results of the program or project. (1,500 characters)

8. Goals and objectives, activities, and timeline. (1,500 characters)

9. Evaluation (1,500 characters)

10. Collaboration/Partners (1,500 characters)

TARGET POPLUATION INFORMATION

Indicate the number of Commerce City residents benefiting from your program and the costs per person.

| Adult Males | Adult Females | | Cost per A | dult | \$ |
|-------------------|---------------------------|--|------------|------|----|
| Youth Males | Youth Females | | Cost per Y | outh | \$ |
| Senior Citizens | Cost per Senior Citizen | | \$ | | |
| Disabled Citizens | Cost per Disabled Citizen | | \$ | | |

BUDGET REQUEST

Complete the Budget Request table by providing expenditures for each category listed.

| Equipment | |
|----------------------------|--------|
| Mileage Reimbursement | |
| Print, Copying and Postage | |
| Professional Services | |
| Supplies | |
| Technology | |
| Training | |
| Other | |
| Total Request | \$0.00 |
| | |

BUDGET NARRATIVE

Provide a detailed explanation of how funds will be used. Provide a full breakdown of the costs associated with each item. The narrative should support the budget table. (1,500 characters)

Organization's Current Budget for Fiscal Year Ending

Provide the organization current fiscal year income and expenses.

| Income: | \$ Expenses: | \$ |
|---------|-----------------|----|
| | | |

Section III: Supporting Documentation Check List (30pts)

Label each attachment and provide in the order listed. Each attachment must be on a separate sheet of paper and all attachments should use 12-point font with 1-inch margins, single spaced. (30pts.)

- □ **Proof of 501(c)3 status** or a description of anything other than 501(c)3.
- □ **Financial Statement -** Include revenues and expenses.
- Major contributors For the previous two fiscal years, list major contributors
 (foundations, businesses, government, individuals) with amounts. Do not include names of individual donors.
- □ **In-kind contributions** Summary of significant in-kind donations (donated goods and professional services) received by the organization for the last fiscal year.
- □ Volunteers
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 - Position(s) on the board (officer and committee positions) including term and date for each member
 - Occupation and name of employer and/or affiliation(s)
- Proof of IRS federal tax-exempt status also called a Letter of Determination This letter must be dated within the last five years.
- □ Anti-discrimination statement adopted by the board of directors.
- □ List of names and TITLES of key staff, including length of service with the organization.
- □ **The organization's operating budget for the current fiscal year**. If available, also include the budget for the upcoming fiscal year.

Signature and Certification:

I certify that this application has been examined and to the best of my knowledge it is true, correct and complete. I certify that the funds requested will be used for the intent and purpose of the grant requested and that if any findings of misuse of funds are discovered, project funds must be returned to the City of Commerce City.

| Executive Signature: | Date: |
|----------------------|-------|
|----------------------|-------|