



Bangor Area
Community
Foundation

GRANT APPLICATION INSTRUCTIONS

We appreciate your continued interest in the Bangor Area Community Foundation (BACF).

As you know, BACF is a public charity organized as a collection of endowed funds, grant programs, and scholarship funds. The organization's primary objective is to provide charitable funding to non-profit organizations and programs that benefit residents of the greater Bangor area. Grants are made in the areas of education, environment, health care, human services, humanities and other areas of public benefit.

BACF gives priority to applicants with projects that:

- Reach a broad segment of the community
- Encourage matching gifts or additional funding
- Assist citizens whose needs are not being met by existing services
- Meet emerging needs, are innovative and have a high probability of leading to new solutions to community challenges
- Are collaborative, comprehensive, promote cooperation among organizations within the region, and have the potential for ongoing community impact

To receive further funding consideration by the BACF board of directors, please submit 10 (ten) copies of your funding proposal in accordance with the following requirements:

- All proposals should be typewritten and double-spaced.
- All the questions should be answered in the order listed.
- Use the headings, subheadings and numbers provided.
- Please do not include any materials other than those specifically requested at this time.
- Do not send videotapes.

BACF will evaluate proposals on a quarterly basis. Applicants will be notified of the board's decision within ninety (90) days of proposal submission.

Applications should be submitted to:

Rocky Johnson
Chair: Grants
Bangor Area Community Foundation
P.O. Box 93
Bangor, MI 49013



COMMON GRANT APPLICATION COVER SHEET

Date of Application: _____

Legal name of organization applying: _____
(Should be same as on IRS determination letter and as supplied on IRS Form 990.)

Year Founded: _____ Current Operating Budget: _____

Executive Director: _____ Phone number _____

Contact person/title/phone number (if different from executive director) _____

Address (principal/administrative office): _____

City/State/Zip: _____

Fax Number: _____ E-mail Address: _____

List any previous support from this funder in the last 5 years: _____

Project Name: _____

Purpose of Grant (one sentence): _____

Dates of the Project: _____ Amount Requested: \$ _____

Total Project Cost: \$ _____

Geographic Area Served: _____

Signature, Chairperson, Board of Directors

Date

Typed Name and Title

Signature, Executive Director

Date

Typed Name and Title



GRANT BUDGET FORMAT

Below is a listing of standard budget items. Please provide the project budget in this format and in this order.

A. Organizational fiscal year: _____

B. Time period this budget covers: _____

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

D. **Expenses:** include a ***description and the total amount*** for each of the following budget categories, in this order:

| | | |
|-----------------------------------|-----------------|-----------------|
| Salaries | \$ _____ | \$ _____ |
| Payroll Taxes | \$ _____ | \$ _____ |
| Fringe Benefits | \$ _____ | \$ _____ |
| Consultants and Professional Fees | \$ _____ | \$ _____ |
| Insurance | \$ _____ | \$ _____ |
| Travel | \$ _____ | \$ _____ |
| Equipment | \$ _____ | \$ _____ |
| Supplies | \$ _____ | \$ _____ |
| Printing and Copying | \$ _____ | \$ _____ |
| Telephone and Fax | \$ _____ | \$ _____ |
| Postage and Delivery | \$ _____ | \$ _____ |
| Rent | \$ _____ | \$ _____ |
| Utilities | \$ _____ | \$ _____ |
| Maintenance | \$ _____ | \$ _____ |
| Evaluation | \$ _____ | \$ _____ |
| Marketing | \$ _____ | \$ _____ |
| Other (specify) | \$ _____ | \$ _____ |
| Total amount requested | \$ _____ | \$ _____ |
| Total project expenses | \$ _____ | \$ _____ |

E. **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.

| | <u>Committed</u> | <u>Pending</u> |
|-----------------------------------|-------------------------|-----------------------|
| 1. Grants/Contracts/Contributions | | |
| Local Government | \$ _____ | \$ _____ |
| State Government | \$ _____ | \$ _____ |
| Federal Government | \$ _____ | \$ _____ |
| Foundations (itemize) | \$ _____ | \$ _____ |
| Corporations (itemize) | \$ _____ | \$ _____ |
| Individuals | \$ _____ | \$ _____ |
| Other (specify) | \$ _____ | \$ _____ |
| 2. Earned Income | | |
| Events | \$ _____ | \$ _____ |
| Publications and Products | \$ _____ | \$ _____ |
| 3. Membership Income | \$ _____ | \$ _____ |
| 4. In-Kind Support | \$ _____ | \$ _____ |
| 5. Other (specify) | \$ _____ | \$ _____ |
| 6. Total Revenue | \$ _____ | \$ _____ |



COMMON GRANT APPLICATION FORMAT

Please provide the following information in this order. Use these headings, subheadings and numbers provided in your own word processing format, thus leaving flexibility for length of response.

A. NARRATIVE

1. Executive Summary

- Begin with a half-page executive summary. Briefly explain why your agency is requesting this grant, what outcomes you hope to achieve, and how you will spend the funds if the grant is made.

2. Purpose of Grant

- Statement of needs/problems to be addressed; description of target population and how they will benefit.
- Description of project goals, measurable objectives, action plans, and statements as to whether this is a new or ongoing part of the sponsoring organization.
- Timetable for implementation.
- Who are the other partners in the project and what are their roles?
- Acknowledge similar existing projects or agencies, if any, and explain how your agency or proposal differs, and what effort will be made to work cooperatively.
- Describe the active involvement of constituents in defining problems to be addressed, making policy, and planning the program.
- Describe the qualifications of key staff and volunteers that will ensure the success of the program. Are there specific staff training needs for this project?
- Long-term strategies for funding this project at end of grant period.

3. Evaluation

- Plans for evaluation including how success will be defined and measured.
- How evaluation results will be used and/or disseminated and, if appropriate, how the project will be replicated.
- Describe the active involvement of constituents in evaluating the program.

4. Budget Narrative/Justification

- Grant budget; use the **Grant Budget Format** that follows, if appropriate.
- On a separate sheet, show how each budget item relates to the project and how the budgeted amount was calculated.
- List amounts requested of other foundations, corporations and other funding sources to which this proposal has been submitted.
- In the event that we are unable to meet your full request, please indicate priority items in the proposed grant budget.

5. Organization Information

- Brief summary of organization's history.
- Brief statement of organization's mission and goals.
- Description of current programs, activities and accomplishments.
- Organizational chart, including board, staff and volunteer involvement.

B. ATTACHMENTS

1. **A copy of the current IRS determination letter** indicating 501(c)(3) tax-exempt status.
2. **List of Board of Directors with affiliations.**
3. **Finances**
 - Organization's current annual operating budget, including expenses and revenue.
 - Most recent annual financial statement (independently audited, if available; if not available, attach Form 990).
4. **Letters of support** should verify project need and collaboration with other organizations.
(Optional)
5. **Annual report**, if available.