



**Hillsboro Community Foundation
Grant Application**

Applications should be emailed to director@hcfoundationks.org

Organization Name: _____

Organization Website: _____

Mailing Address: _____

Number/Street

City

State

Zip

Telephone #: (____) _____ Fax #: (____) _____

Executive Director/Top Executive: _____

Title: _____

Telephone #: (____) _____ Ext: _____ Alternate Telephone #: (____) _____

Email Address: _____

Project/Program Director (if different than Executive Director/Top Executive): _____

Title: _____

Telephone #: (____) _____ Ext: _____ Alternate Telephone #: (____) _____

Email Address: _____

Were you funded in 2015 or 2016 by Hillsboro Community Foundation? Yes No

If yes, did you submit a follow-up report? Yes No

If no, you must submit a follow-up report for consideration.

Follow-up report is included with this application.

Please provide a brief description of your agency and the population served.

Project/Program Title: _____

Type of grant requested.

- Capacity Building
- Capital
- General Operating Support
- New Project/Program
- Existing Project/Program
- Expansion of Existing Project/Program
- Other _____

Please indicate which categories best reflect the purpose of this request. *(You can indicate more than one category if applicable.)*

- Arts & Culture
- Science & Education
- Community Preservation & Revitalization
- Health & Human Services
- Emergency/Disaster Needs
- Animal Welfare
- Other _____

In 100 words or less, please summarize your project/program.

Approximate number of people to be served by this project/program: _____

Date when funds will be needed: _____

Total project/program cost: \$ _____

Total amount of funding requested (*not to exceed \$2,500*): \$ _____

Total grant requests frequently exceed the amount of available funding. Is there a minimum grant amount acceptable for the project/program to proceed? Yes No

If yes, what is the minimum grant amount acceptable for the project/program to proceed? \$ _____

Do you have any *pending* or *committed* funding sources for this project/program? Yes No

If yes, please identify both *pending* and/or *committed* source(s) and amount(s).

Is the project/program cost greater than your grant request? Yes No

If yes, how do you plan to raise the remaining balance?

Is your grant request greater than the cost of your project/program? Yes No

If additional funding, above the amount of your project/program, was made available to your organization, how would the additional funds strengthen your project/program?

How will this project/program directly impact the community of Hillsboro?

How does this request embody one or more of the following:

1. Urgency or immediacy to address a critical need;
2. Excitement because it's a bold new venture;
3. Creativity in providing new solutions to age old problems.

How did you determine the need for this project/program?

How will you evaluate the success of your project/program?

Organization is a 501(c)(3).

Proof of 501(c)(3) status is included with this application.

Organization is not a 501(c)(3).

Is your organization a public agency/unit of government?

(i.e., educational institution, church, a city, or county) Yes No

If no, please identify the qualified organization that will serve as the project/programs fiscal sponsor.

Name of Organization: _____

Contact Person: _____

Mailing Address: _____
Number/Street

City State Zip

Telephone #: (____) _____ Ext: _____

Email: _____

Proof of project/programs fiscal sponsor's 501(c)(3) status is included with this application.

Employer Identification Number (EIN): _____

We give permission to use our group's name and project/program in publicity. Yes No

I certify, to the best of my knowledge, that all information included in this application is correct. The tax exempt status of this organization is current. If grant is received through the Hillsboro Community Foundation, an affiliate of Central Kansas Community Foundation, for the purposes described herein shall be restricted as stated herein.

Signature of Representative Requesting Grant

Date

Hillsboro Community Foundation, an affiliate of Central Kansas Community Foundation, manages the Hillsboro Area Impact Fund. If you have questions or need further information, please contact Cynthia Fleming director@hcfoundationks.org or 620-947-0170.