IN KIND GRANT APPLICATION FOR 2021
Please review the Frisco In-Kind Grant Application Guidelines

DEADLINE: WEDNESDAY, AUGUST 12, 2020 at NOON

ORGANIZATION NAME: _____ _____

MAILING ADDRESS: _____

PHYSICAL ADDRESS: _____

EXECUTIVE DIRECTOR/ADMINISTRATOR: _____

EXECUTIVE DIRECTOR/ADMINISTRATOR E-MAIL: _____

GRANT CONTACT PERSON: _____

E-MAIL: _____   **PHONE:** _____

WEB ADDRESS: _____

IRS 501(c)(3) #: _____

COLORADO CHARITABLE SOLICITATIONS #: _____
(Registration numbers do not apply to Summit School District or government agencies)

GRANT APPLICATION WRITTEN BY: ☐ **Volunteer** ☐ **Paid Staff** ☐ **Paid Grant Writer**

IMPACT AREA (*please refer to The Summit Foundation document found in the Guidelines document*):

☐ **Arts & Culture** | Focus: *Enriching Arts and Culture*

☐ **Bright Futures** | Focus: *Succeed in Education and Life*

☐ **Environmental Stewardship** | Focus: *Preserve the Natural Beauty of Our Community*

☐ **Healthy & Safe Communities** | Focus: *Access to Affordable and Quality Healthcare and Supportive Services*

_____   _____

Signature, Authorized Agent   **Date**

I.   AGENCY INFORMATION – Briefly describe:
A.   The mission of the organization:

B.   The history of the organization:

C.   Current programs and accomplishments (numbers served, events held, services provided, etc.):

D.   Please list the Board of Trustees/Directors, and occupation of each member:

E.   Revenue and expense summary for the entire organization:

2019 Actual Operating Revenue: _____   **2019 Actual Operating Expenses:** _____
2020 Estimated Revenue: _____   **2020 Estimated Expenses:** _____
2021 Projected Operating Revenue: _____   **2021 Projected Operating Expenses:** _____

F.   **This applies only to first time (new)** applying organizations OR if your IRS nonprofit status has changed. Please attach your organization's 501(c)(3) IRS determination letter.

II.   PURPOSE OF GRANT
A.   What is your In-Kind request(s)? Please be as specific as possible *(i.e. what, when, for how many days/hours, etc.).*

B.   For what project/program are you making these requests? Please describe the project/program if applicable.

C.   How does this project/program benefit the local community? If available, provide data or research that supports your request.

III. EVALUATION
A.   How will you measure the impact of the project/program?

B.   If you received an in-kind service in the past calendar year, please briefly describe how your organization has used these services, and to what extent you have reached your goals as outlined in the original grant application(s).