

Ridgway Borough Charitable Fund

Elk County Community Foundation Erie Avenue•P.O. 934•Saint Marys, PA 15857 814.834.2125• Fax 814.834.2126

eccf@windstream.net • www.elkcountyfoundation.com

Please complete this form and submit it along with the requested items as outlined in *Instructions for Submitting a Grant Application*. Grants will not be considered until all material has been received.

Application Date	Legal Name of Organization			ncorporation
Is your organization t	ax-exempt under Sec	ction 501 (c) (3) of the Interna	al Revenue Code? Y	N
Does your organization	on serve the resident	s of the Ridgway Borough? Y	N	
Last Name		First Name	MI	
Mailing Address				
City		State	Zip Code	
Phone	Fax	E-mail		
Grant Area of Inte	rest:			
The Arts		Othe	er (please explain)	
Economic De	evelopment			
Education				
The Environ	ment			
Health and S	Social Services			
Project Duration:				
Total Cost of Proje	ect:			

Amount requested from the Foundation:

Application is considered incomplete and will not be considered if amount requested is left blank.

Grant Abstract - provide the following information either on this page or by answering the question in a one pager, double spaced narrative. Additional explanation and information may be included in items request in Grant Proposal Requirements Found on page three of this application form.

Brief Project Description	
Who and how many will benefit?	
What are your other sources of funding for this	is project?
Why is this project valuable/necessary?	
How will it be funded in the future?	
How will you evaluate the success of this proj	ject?
 application. ♦ One copy of the current IRS determines ♦ One copy of the proposed program/prosection ♦ One copy operating budget for the curbalance sheet. Need to send only a sum ♦ One copy of the most recent year-end \$5000. ♦ Name and addresses of your Board of I The Undersigned hereby certify that all information 	oject budget crent and next fiscal year, including income statement and mmary if possible. financial statements (audited if available) if applying for over Directors and administrative staff. formation contained in and submitted with this proposal the the approval of the Board of Directors. This Organization
Signature of Board Chairperson	Date
Signature of Agency CEO	Date

Grant Application Form Project Budget Statement

Project Budget – provide the following information either on this page or on a one page spread sheet or narrative. List all income for this project including inkind gifts

Source	Amount
Total	
Expenses	Amount
T 1	
Total	

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INSTRUCTIONS FOR SUBMITTING A GRANT APPLICATION

- A. Fill out the enclosed GRANT APPLICATION FORM and overview questions.
- B. Grant Proposal Requests should include the following information. Please provide your information in this order, using the outline.

1. Organization Information:

- a. Brief summary of organization's history, mission and goals.
- b. Description of current programs and past accomplishments.
- c. Target population that this project/program will benefits and number of Ridgway residents served by this project.
- d. How does the agency work with others providing similar services, or how it is unique?

2. Purpose of this Grant:

- a. Describe the program/project, the need(s) it will address and what it will accomplish.
- b. Is it a new or ongoing program/project of the organization?
- c. List the program/project goals, objectives.
- d. Describe the timetable for this program to be completed.
- e. Do other organizations provide services similar to your program? If so, why is it important that your agency also provides this service?

3. Budget Information (Please use page 3 of the application for section "a" and "b")

- a. State the exact dollar amount of program/project budget being requested for this grant and the expected expenses including in kind gifts.
- b. List all sources funding for the program/project.
- c. Indicate the amounts requested and the status of your proposal with each funding source if applicable
- d. What are the long-term strategies for funding the program/project beyond the grant period?
- e. If this is a collaborative proposal, how will this agency work with other organizations involved?

4. Personnel and Follow-up

- a. Indicate names and contact information for individuals responsible for this project.
- b. Provide names and contact information for other individuals involved in this project.
- c. What are the qualifications and expertise of the individuals responsible for the implementation of this program/project?
- d. How will you evaluate this program/project?
- e. Are there any special circumstances that ECCF should be aware of regarding your organization or the program /project