



## Page County Community Foundation HF2302 Grant Program Fact Sheet

The goal of the Page County Community Foundation grant program is to improve the quality of life in the County by supporting needs that are not being met in the areas of civic, cultural, health, education and social service.

Nonprofit organizations considering applying for a grant are encouraged to call the Foundation office. The application process begins with an application that is reviewed by the PCCF Grants Committee. Based on that review; the Committee will deny, approve, or ask for further information. Occasionally the Foundation will request a site visit. The Grants Committee makes recommendations to the full Advisory Board of Directors who make the final determinations.

Eligible applicants are 501(c)(3) certified organizations that serve Page County. The organization's governing board must approve all applications prior to submission.

Successful applications will include the following components:

- Respond to a demonstrated or emerging community need.
- Support effective, proven or promising solutions.
- Build upon and maximize other community resources.
- Offer a clear plan for financial sustainability.
- Part of the criteria for successful applications is the completeness, consciousness, and quality of the application.
- The PCCF, except under unusual circumstances, does not make grants for endowment campaigns, deficit financing, annual fund drives, or fundraising activities.
- The PCCF gives less consideration to applications from tax supported organizations, individual churches, or similar religious groups.
- The PCCF will not consider applications from cemetery associations, veteran and labor organizations, social clubs, or fraternal organizations.

### How to apply

Grant applicants are expected to complete the Page County Community Foundation Grant Application Form, which includes specific questions related to the proposed project and its significance as well as the financing and management of the agency. Earlier versions of this form will not be accepted.

Grant requests will be considered annually. The grant calendar is as follows:

Grant Proposal Deadline*	Applicant Notified
February 1	Early April

\*If this date falls on a weekend or holiday, the deadline will be the next business day.

### Available Grant Money

Approximately \$101,000 will be available from the Page County Community Foundation in 2010. The Page County Community Foundation grant dollars will be awarded for a single year.

Additional contact, correspondence, or site visits with Foundation staff and committee members, when necessary, will be conducted following preliminary review of proposals.

## Page County Community Foundation HF2302 Grant Application

This Page County Community Foundation Grant Application was developed to simplify the grant process for Page County's nonprofit community. It is important to review the attached fact sheet and/or contact Dennis Nissen at [dennis@omahafoundation.org](mailto:dennis@omahafoundation.org) or Denise Cardos at [denise@omahafoundation.org](mailto:denise@omahafoundation.org) or both at 800-794-3458 with grant related questions.

### ITEMS IMPORTANT FOR ALL APPLICATIONS

- No handwritten grant applications will be accepted. You may download the application as a MS Word document from [www.iowacommunityfoundations.org/Pagecef](http://www.iowacommunityfoundations.org/Pagecef). This is a form document and entering data is restricted to only certain areas. Contact Denise Cardos with questions on working with this application form.
- Use only the forms provided. The application is a protected form, to add additional lines please go to the end of the line and hit enter. The line you add will allow you to enter data.
- Concerning the use of a fiscal agent. For this grant process you may use a fiscal agent (a nonprofit holding a 501(c)(3) letter) if your organization is not a 501(c)(3) organization you must find another nonprofit that is willing to act on your organization's behalf as the fiscal agent. **A fiscal agent is a nonprofit organization that has received an IRS letter of determination that they are a 501(c)(3) nonprofit. If this grant request is awarded, the check would be mailed directly to your organization but it would be made out to the fiscal agent. The fiscal agent is the nonprofit that is accepting responsibility for the distribution of the funds as described in the grant application.**
- **One** copy of the grant application emailed to [grants@omahafoundation.org](mailto:grants@omahafoundation.org).
- Mail **one** copy to the Clarinda Foundation, P.O. Box 273, Clarinda, IA 51632 or the Greater Shenandoah Foundation, P.O. Box 287, Shenandoah, IA 51601.
- Only one proposal per agency will be accepted unless the agency is acting as a fiscal agent for another organization and the funder has approved additional applications. Do not send additional materials.
- All grants submitted become the property of the OCF. This information may be shared with other agencies and community donors.
- **Do not** staple the proposals or put them in binders, notebooks, or other presentation packages.
- **NO APPLICATIONS WILL BE ACCEPTED PRIOR TO JANUARY 15<sup>TH</sup>.**
- Contact Denise Cardos at [denise@omahafoundation.org](mailto:denise@omahafoundation.org) if you have any questions regarding any of the OCF grants or would like additional information regarding the PCCF application process.

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### Page County Community Foundation Advisory Board

#### Jeannine Liljedahl—Sec/Treasurer (2010)

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#### Robert Norris, Esq. (2012)

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## Instructions for the Page County Community Foundation HF2302 Grant Application

**Fully** complete the three main sections of this Page County Community Foundation Grant Application: Program Narrative, Financial Information, and the Board Information. Please carefully read the explanations of what should be included in both of these sections of your application. To add additional lines please hit enter at the end of a line.

**1. PROGRAM NARRATIVE:** Do not exceed three (3) pages. Clarity and brevity are essential. The program narrative should address the following items in the order they are listed using the headings provided. Please answer the bulleted items in paragraph format and be sure to answer with complete sentences. Remember that grant committee members review many applications, so please clearly present your information.

- **Organizational Description:** A brief description of your organization.
- **Amount:** Amount requested.
- **Purpose:** Purpose of your request (the need you address).
- **Population Served:** Target populations you plan to serve, including geographic location, socio-economic status, race, ethnicity, gender, age, physical ability, and language. Include the number of clients served. Neighborhood organizations should include their geographic boundaries and the name of a school in their service area.
- **Results:** Effect your action will have on the need, the problem, or the opportunity.
- **Evaluation of the Program:** Discuss how you will know if this program is successful. How will you measure this?
- **Strategies:** Strategies you will employ to implement the program, including, if applicable, collaborations with other agencies.
- **Sustainability:** Describe how your organization will sustain this program once grant funds have been spent.
- **Similar Services:** List three other organizations that offer similar services. Discuss if and how services are coordinated and/or complement each other.

**2. FINANCIAL INFORMATION** (Please use the three budget forms provided)

- **A. Budget Summary:** This is an overview of the budget for your program and your organization.
- **B. Organizational Budget:** Current year financial information for your organization (please use the format provided).
- **C. Proposed Program Budget:** List sources and amounts of **all** income including this request and the status of each request (confirmed or pending); list expenses related to the program.

**3. BOARD MEMBERS**

- List of current board members, the role they serve, and professional affiliations (employer and title). Please use the page provided at the end of this application.

**Checklist: These items must be included with your application. Completed applications must be emailed to [grants@omahafoundation.org](mailto:grants@omahafoundation.org); a completed application must be mailed or delivered to the Clarinda Foundation of the Greater Shenandoah Foundation.**

- Cover page
- Program narrative, with headings provided; not to exceed three pages
- Financial information including the budget summary, organizational budget, and program budget
- List of current Board Members, the role they serve, and their professional affiliation. Please copy or type your board list on the page provided. (not to exceed two pages)
- IRS 501(c)(3) letter

All grants submitted to the Community Foundations of Southwest Iowa become the property of the Foundation. We retain all grant applications submitted. This information may be shared with other agencies and community donors.

**Page County Community Foundation Grant Application  
Cover Page**

**County Grant you are applying for:** Page County Community Foundation

**Application date:**

**Federal Tax ID number:**

**Please use the drop down lists to answer the following questions.**

Organization Type [Click here for list](#)

Agency Focus [Click here for list](#)

Program Focus [Click here for list](#)

Use this space to provide information for your organization

**Organization Name:**

**Contact person and title:**

Complete mailing address:

Phone:

Fax:

Email:

Website:

Executive Director or CEO:

Use this space to provide information if you marked "not a 501 (c)(3)" and are applying for funds through a fiscal agent.

**Fiscal Agent Name:**

**Contact person and title:**

Complete mailing address:

Phone:

Fax:

Email:

Website:

Executive Director or CEO:

\_\_\_\_\_  
Typed Signature of Fiscal Agent

**Name of the proposed program:**

**Please give no more than a three-sentence summary of request:**

**Dollar amount requested:**

**Total Project Cost:**

What was the last grant your agency received from this funder? (Include award, date of the award, and purpose of grant)

I have read the guidelines for this Page County Community Foundation Grant Application and the Fact Sheet for the funder to which I am submitting this request. I understand that not all funders use this format.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## **Page County Community Foundation Grant Application**

**1. PROJECT NARRATIVE – Please use subsection headings below** (Not to exceed three pages. Please fill in after heading.)

**Organizational Description:**

**Amount:**

**Purpose:**

**Population Served:**

**Results:**

**Evaluation:**

**Strategies:**

**Sustainability:**

**Similar Services:**

**Page County Community Foundation Grant Application**

**A. Budget Summary**

**Program Budget Summary for this proposal**  
(must match figures in Part C, Proposed Program Budget)

- |                                                              |    |
|--------------------------------------------------------------|----|
| 1. Applicant's contribution from operating funds, if any     | \$ |
| 2. Amount of this request                                    | \$ |
| 3. Amount of other pending requests, if any (list them here) | \$ |
| 4. Amount of other confirmed requests, if any (list here)    | \$ |
| 5. Amount of in-kind contributions                           | \$ |
| 6. Total income (1+2+3+4+5=6)                                | \$ |
| 7. Total expense                                             | \$ |
| 8. Balance (6-7=8)                                           | \$ |

Total income and expense summaries for the organization

	<b>Actual Income and Expenditures</b> (from tax returns or audits, if possible)	<b>Budgeted</b> (must match figures in Part B, Org. Budget)	<b>Budgeted</b> (If available)
	Last fiscal year ending:	Current fiscal year ending:	Next fiscal year ending:
<b>Income</b>	\$	\$	\$
<b>Expense</b>	\$	\$	\$
<b>Net</b>	\$	\$	\$

Page County Community Foundation Grant Application

**B. Organization Budget**  
(for current year)

**INCOME**

<u>Source</u>	<u>Amount</u>
Government grants & contracts (Local, State & Federal)	\$
Foundations	\$
Corporations	\$
United Way or other federated campaigns	\$
Individual contributions	\$
Fundraising events & products	\$
Membership & fee income	\$
Investment income	\$
<b>Other (please specify)</b>	\$
<b>Total income</b>	<b>\$</b>

**EXPENSES**

<u>Item</u>	<u>Amount</u>
Salaries & wages	\$
Insurance, benefits & related taxes	\$
Consultants & professional fees	\$
Travel	\$
Equipment	\$
Supplies	\$
Printing & copying	\$
Telephone	\$
Postage	\$
Rent & utilities	\$
Depreciation	\$

**Other (please specify)** \$

**Total expenses** \$

**Difference (Income less expenses)** \$

**Page County Community Foundation Grant Application**

**C. Proposed Program Budget**

<b>INCOME</b>	
<b>Source</b>	<b>Amount</b>
Government grants & contracts (Local, State & Federal)	\$
Foundations (Include this request)	\$
Corporations	\$
United Way or other federated campaigns	\$
Individual contributions	\$
Fundraising events & products	\$
Membership & fee income	\$
Investment income	\$
In-Kind	\$
<b>Other (please specify)</b>	\$
<b>Total income</b>	<b>\$</b>

<b>EXPENSES</b>		
<b>Item</b>	<b>Amount</b>	<b>%FT/PT</b>
Salaries & wages (break down by position and indicate if full or part-time)	\$	
Subtotal	\$	
Insurance, benefits, & related taxes	\$	
Consultants & professional fees	\$	
Travel	\$	
Equipment	\$	
Supplies	\$	
Printing & copying	\$	
Telephone	\$	
Postage	\$	

Rent & utilities	\$
Depreciation	\$
In-Kind	\$
<b>Other (please specify)</b>	\$
<b>Total expenses</b>	\$
<b>Difference (Income less expenses should equal zero)</b>	\$

**List of current board members, the role they serve, and professional affiliations  
(employer and title)**