

# Growing in Love of God and neighbor

# **COMMUNITY CAPITAL GRANT APPLICATION**

## Application Deadline September 30, 2023

The Community Capital Grant Program is issuing monies for up to \$35,000.00 for the 2023 fiscal year. We may select one or several recipients depending upon applications received. Funding is for capital improvements or non-capital program startup costs to either an existing or new program or projects that serve Burlington County and or the residents of Camden. Non-capital costs can include expenditures and start-up costs like supplies, toys for a daycare program, cookware for a meals program or initial training.

#### **SECTION 1: ORGANIZATION INFORMATION**

Name of Organization		
Address		
City, State, Zip		
County	Tax ID Number	
Email	Office Phone	
Organization's website		
Organization's Facebook page		
SECTION 2: MAIN CONTACT DETAILS		
Name and Title of Contact		
Email address		
Primary phone number	Alternate Phone number	

# **SECTION 3: REQUEST FOR FUNDING** (attach additional page(s) as needed)

1.	Project Name
2.	Amount of Grant Funds being requested
3.	Has your organization ever received any outside funding from a foundation, government or any other source for the focus of this project? Yes / No
	If yes, please provide the status of the funding, how it was used and the outcome of the project.
1	Please provide a copy of the (2) most recent Financial Statements & Annual Reports of
7.	the organization by attaching them to the end of this application. If you are sending electronically, please note that here.
5.	Please include in the Space below, or by attachment, additional information that you would like to add about your organization that is not included in your Financial Statements and or Annual Reports.
discrii status	ets, programs and activities for which organizations are seeking grant monies may not minate on the basis of race, color, religion, sex, age, national origin, ancestry, familial s, marital status, sexual orientation or preference, gender activity or expression, citizenship s, disability or any other characteristic protected by applicable law.
The p	roject described in this application complies with this non-discrimination requirement:  Yes No

## **SECTION 4: PROJECT DESCRIPTION** (attach additional page(s) as needed)

PLEASE PROVIDE ANY DEFINITIONS FOR THE TERMS AND LANGUAGE USED IN YOUR SUMMARY THAT MIGHT HELP THE READERS TO FULLY UNDERSTAND THE PROJECT.

T	MIGHT HELP THE READERS TO FULLY UNDERSTAND THE PROJECT.
1.	Provide an Executive Summary.  This short summary should describe the project and include the following: project goals & objectives, describe the target group and the beneficiaries of this project, identify the need or needs to be addressed, provide a timeline and procedure for implementation. If this is a new project for your organization explain how you identified the need, if you are partnering with another organization describe your relationship and their part to play.
	1. Executive Summary
2.	Provide the names of your organization's Leadership Team and those Members that will be directly engaged in this project.
3.	How will you define and measure success for this project?

### **SECTION 5: BUDGET** (attach additional page(s) as needed)

- 1. Provide the total cost for this project, and if this is part of a larger project, please ALSO enter the total budget and not just the costs you are allocating for this grant.
- 2. Provide a budget narrative and include how the costs were estimated (either by line item and or category), the allocation of monies and from what sources, schedule of disbursements, funds committed and funds pending.

3. For this specific project, list other Funders that you are seeking grant monies from, the funds requested and the status of the request.

#### **SECTION 6: RESPONSIBLE PARTIES & SIGNATURES**

Please Print or Type Name & Sign

\_\_\_\_\_date \_\_\_\_\_ Person- in-Charge (if applicable) date Program Director or Project Leader \_\_\_\_\_ date\_\_\_\_\_ Treasurer (if applicable) **Authorized Signature** I, the undersigned, certify that all information in this application is complete, correct and true to the best of my knowledge and that I am authorized to sign this application on behalf of the officers listed above. Name and title date Signature