

Cover Page

Organization Conducting Project*
Please include Federal Tax ID Number

Contact Name and Contact Information*

This is where all correspondence will be sent

Include name, physical mailing address, phone number, and email address

Requesting/Fiscal Applicant (if different from above listed organization)*

Include name, physical mailing address, phone number, and email address

Application Form

Application Basics

Project Name*

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Project Summary*

Provide a brief summary of the project.

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Program Area* Check only one.

☐	Arts/Culture/ Humanities	☐	Human Services	☐	Education	☐	Environmental/ Animals
☐	Public/Society Benefit	☐	Health	☐	Recreation	☐	

Funding Request Type*

☐	Program Based <i>(Operational, activity, general programmatic support)</i>
☐	Capital Based <i>(The building of or physical improvement of something)</i>

Organization Information

Organization Type*

Note: Please include a copy of 501(c)(3) IRS Determination letter with the grant application.

Schools are government entities for the purposes of this application.

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Mission Statement or Organizational Purpose*

What is your organization's mission statement or overall purpose?

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Board of Directors/Management Staff*

Provide a list of your Board of Directors or Management Staff. List should include names, roles, terms, and professional affiliations.

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Fiscal Sponsorship*

Is the organization applying for this grant doing so on behalf of another, independent organization or group?

Example: ISU Extension and Outreach (a 501(c)(3) organization) applying on behalf of Wright County Third Grade Safety Day Camp, (not a 501(c)(3) organization). Department applying through their city/county or schools are not fiscal sponsorships. **If YES, please be sure to include a Fiscal Sponsorship Agreement form as an attachment.**

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Project Details

Project Description*

Provide a complete description of the project. Include activities, services, and other details about the implementation of the project.

Project Start Date*

Project End Date*

Ongoing Project*

Is this an ongoing project?

Expected Outcomes*

What are the expected outcomes? This should not be a list of *outputs* (activities, services, materials, etc.), but a description of *outcomes* (impact, results, etc.). Explain how this project will make a difference in Wright County.

Project Contact*

Who is the primary contact for this project?

Person's Name

Organization

Physical Mailing Address

Phone Number

Email

Have you previously received funding from Wright County Charitable Foundation? If yes, when and for what purpose?*

Community Impact

While this project may benefit people from outside Wright County (for example, a museum that attract people from out of the area), limit the following responses to the impact your project will have on the citizens of Wright County.

Community Need*

What community need in Wright County does this project address? What is your organization's strategy to address this need? If this project is open to residents outside of Wright County, explain how funds will be used specifically for Wright County residents.

People Served*

Describe the people who will directly benefit from this project, indicate the age, race/ethnicity, socioeconomic status, and/or the specific community/area/region within Wright County being served.

Youth Being Served*

Provide the estimated number of youth (ages 0-18) from Wright County who will *directly* benefit from this project within the next year.

Adults Being Served*

Provide the estimated number of adults from Wright County who will *directly* benefit from this project within the next year.

Financial Information

Total Project Amount*

Request Amount*

Budget Narrative*

Describe in detail how grant money would be spent. What is the organization's strategy if only partial funding is allocated?

Total Project Budget*

Include a **detailed project** budget, which includes all sources of income and expenses for this project. **A twenty percent (20%) match is necessary, which could include "In-Kind" gifts/services** (see Grant Application Overview for definition), other grant requests, etc. Indicate if other funding is pending, approved, or received.

Support Document (Optional)

Please attach your IRS Determination Letter if you are not using a Fiscal Agent. If you wish, you can include additional documents with this application. They should be limited to project bids or a quote outlining the project, etc.

Future Funding Plans*

Indicate how this project will be sustained in the future.

Applicant Feedback

Our foundation is interested in improving our grantmaking practices (the level at which our process is transparent, flexible, and simple for applicants). The following questions seek feedback from applicants that will assist us in this process. We encourage you to be as honest as possible. Your answers will not affect your organization's chances of being awarded a grant through the Wright County Charitable Foundation.

Question 1*

How long did it take you to complete this application?

Question 2*

What is the most challenging question of this application and why?

Question 3*

How familiar are you with the Wright County Charitable Foundation website and the resources provided?

Question 4*

What is needed by your organization to be transformational in your work?

Authorized Signature

Important! By entering data into the next three (3) fields calling for insertion of your Name, Title, and Date, you are:

- (1) representing that you are an officer or other agent for the Legal Applicant duly authorized to enter into legally binding agreements on behalf of the Legal Applicant
- (2) agreeing to submit this grant application form on behalf of the Legal Applicant
- (3) agreeing that you provided true, accurate, current, and complete information
- (4) agreeing that your insertion of data into these following fields constitutes an electronic signature

Name (Authorized Signature)*

Title*

Date:*

File Attachment Summary

Applicant Documents Included*

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Submit to Wright County Charitable Foundation

Save your application as a pdf and...

Email to: wced@wrightco.iowa.gov

OR

Print your application (8 copies, three-hole punched) and...

Mail to:

WCCF

Post Office Box 214

Clarion, Iowa 50525

OR

Print your application (8 copies, three-hole punched) and...

Deliver to:

Wright County Economic Development – Basement of the Courthouse

115 North Main Street

Clarion, Iowa 50525