

Saddle Hills County
Recreation Capital Grant Application

APPLICATION DEADLINE IS FEBRUARY 28th

ORGANIZATION INFORMATION

Organization Name _____

Mailing Address _____

Postal Code _____

Contact Name _____ Title _____

Telephone Business _____ Home _____

Registered Society or Charity Number (if applicable) _____

Has your organization previously received capital financial assistance from Saddle Hills County?

Yes ~~Year~~ _____ \$ _____ "No" _____

Is your organization presently receiving financial assistance from other municipalities, other levels of government, public agencies, or other sources?

"Yes" _____ "No" _____

Group/Organization's Purpose of Mission

Briefly outline your Organization's Purpose and Mission

Group/Organization's Programs and Services

Provide a brief description of the programs and services provided by your group.

Project or Program Description

Provide a description of the project for which you are requesting funding.

Attach the following documents, to this application:

1. Project Budget
2. Financial Statement for the most recent fiscal year (If this is not available at this time, it must be submitted as soon as possible, and prior to receiving any funding)
3. Written quotes or estimates (if applicable)
4. Letters of support (If available and applicable)

PURPOSE AND NEED

Please describe the facility for which the grant is being requested. Include details such as timing, anticipated participation, etc. Describe how the program or project will benefit your community and the County. A separate page may be attached, if necessary.

What are the goals and objectives of the facility? How will County residents benefit? How will the success of the project be measured? A separate page may be attached, if necessary.

Describe the membership of your organization, including both total and County resident members and participants. A separate page may be attached, if necessary.

Describe the level of volunteerism and fundraising efforts.

Discuss your ability to maintain operational costs after completion of the proposed capital project.

Discuss your ability to complete the project successfully and within budget.

Provide any other information that you feel may assist County Council in determining the eligibility of this project, for capital grant funding.

Describe the implications of not receiving the grant funding, or of receiving less than the requested amount.

Are funds being sought from other sources to support this program or project?

Grant Amount Requested:

Declaration Statement

We the undersigned representative(s) certify that this application is complete and accurate.

Name _____ Title _____

Signature _____ Date _____

Name _____ Title _____

Signature _____ Date _____

Obligations Upon Receiving Grant

Grant recipients will receive a letter outlining the approved grant amount, including specific items approved or denied. Organizations may only spend grant funds on the specific items approved. Recipients must submit a report within the time identified in the letter to account for funds spent and to indicate the success in achieving project/programs goals and objectives through measures identified in the approved application. Failure to submit a report, or delinquency in submission, may affect future grant application consideration. At any time, grant recipients must permit a representative of Saddle Hills County to examine books or records to determine if the grant funding has been used as intended and approved.

APPLICATION CHECKLIST

- Application Form
- Group/Organization's Purpose and Mission
- Group/Organization's Programs and Services
- Project or Program Description
- Performance Measurement Information
- Project Budget
- Financial Statement for most recent fiscal year
- Written quotations or estimates (if applicable)
- Letters of support
- Declaration Statement