

Community Foundation of Ellis

A 501c3 Non-Profit Organization
820 Washington ~ Ellis, KS 67637 ~ 785-726-2660

Applicant: _____ Date: _____

Address: _____ City: _____

State: _____ Zip: _____ Email: _____

Contact Person: _____ Phone: _____

Project Name: _____

Due to limited funding and the competitive nature of the grant process, we advise you to be thorough and detailed in your application.

Grants funds will be awarded with preference given to tangible, long-lived community assets for an amount not to exceed \$1,000.00. Expendable items may be awarded by a matching grant only, with an amount not to exceed \$500.00.

Grant Funds Request (please follow these instructions)

- All applications must use this cover page
- Please list all board members/directors on a separate page
- Complete the Application's Budget Page and attach to application
- Tell us about your proposal. Include the following sections in your narrative on an 8 ½ x 11 sheet, in no more than 1,000 words:
 - Mission or purpose of organization
 - Definition of need
 - Targeted population & how many will be served
 - Description of the project, measurable objectives, and evaluation of the objectives
 - Timetable for project
 - Additional support used for this project (other grants, fundraising, etc.)
- Follow-up report, due up to six months* after awarding grant showing receipts, success or failure of project, and progress of project

*If your organization does not provide the required documentation for use of grant funds before the deadline of a new grant cycle, you will be ineligible for the next grant round.

Project Information

Community Foundation of Ellis Grant

Time Period for the project: From _____ to _____

Date funds are needed: _____

Amount requested: \$ _____ (An amount up to, but not to exceed \$1,000.00)

Community Foundation of Ellis Matching Grant

Time Period for the project: From _____ to _____

Date funds are needed: _____

Amount requested: \$ _____

(An amount up to, but not to exceed \$500.00, funds will be matched 1:1 cents)

Amount Raised: \$ _____

(Include summary documentation of fundraising activity)

Submit your completed grant request, including this cover sheet, board list, budget, and narrative by

(1st round)- March 31, 2024 awarded in April, and

(2nd Round)- August 31, 2024 awarded in September

to: **Community Foundation of Ellis, 820 Washington, Ellis, KS 67637**

Time and location of award ceremony will be announced. Questions, please call 785-726-2660.

Revised 12/20