Grant Application



GRANT GUIDELINES

To be considered for a grant, your event or organization must be located in the County of Racine and must benefit the public. Encouragement of economic development, tourism, cultural affairs, education, recreation, creation of employment opportunities, promotion and maintenance of public health, and enhancement of the tax base are examples of initiatives that provide direct advantages and benefits to the public at large.

Complete the entire application and attach the following documents as PDF or MS Word:

- A detailed summary of the request, including costs, purpose, and other fundraising efforts you are engaging in to finance the activity.
- If applicable, include a copy of the Internal Revenue Service ruling or determination letter of status under section 501(c)(3) of the IRS Code.

Additional information:

Applications are due by August 1, 2017. Responses will be emailed to the contact person by September 1, 2017.

Applications submitted after the August 1, 2017 deadline may be considered but there is no guarantee of a selection time frame; selections will be made based on remaining funds per fiscal year.

Email all submissions and relative attachments to: Grantapplications@racinecounty.com

Organization Information

- 1. Organization Name: *
- 2. Department / Area Name
- 3. Organization Mission:

4.	Year Established:
5.	EIN#
6.	Address 1: *
7.	Address 2:
8.	City: *
9.	State: *
10.	Zip: *
11.	Executive Director Name:
12.	Executive Director e-mail:
13.	Website:
Co	ontact Person
14.	Full Name *
15.	Phone Number * ext.
16.	Email *
Fi	nancial Information
17.	Total Annual Budget of Organization *
18.	Are you financial records subject to an annual audit? Yes No
19.	If yes, is a copy of audit available upon request? Yes No
20.	IRS W-9 Attachment Yes No

- 21. Are you a registered 501(c)(3)? Yes No If yes, attach copies of relevant Internal Revenue Service ruling of determination letters. 22. Attach a list of previous applications to Racine County for the last five years (Application Date, Project / Program Title, Amount Requested, Approved / Denied, Amount Received) **Project / Program Information** 23. Project / Program Name * 24. Brief Activity or Project Description - You may use #26 if you wish to attach your Description 25. Type of Project / Program Special Program One Time Capital Expense **Operating Support Matching Funds** Other, please specify
- 26. Activity or Project Description Attachment You may use #24 if you wish enter your Description Summarize the project describing the purpose and issues that will be addressed.

Indicate who will benefit and estimate their number.

What is the target population and geographical area served?

How was need determined and how will the project / program respond to this need?

Indicate your organization's special qualifications to address their needs.

Purpose outcome - List up to three measurable outcomes for the project.

- 27. Total Needed for Activity
- 28. Amount being requested from Racine County
- 29. Funds currently raised
- 30. Activity date, if applicable

Begins

31. Attach additional supporting documents as needed

Note:

- PDF and Micosoft Word only
- Name documents using your organization name

TERMS OF AGREEMENT

IF WE RECEIVE A GRANT, IT IS UNDERSTOOD THAT:

We agree to use the funds received as outlined in this grant request.

We agree to provide updates on activities when requested.

We agree to provide additional project or organization information as requested by Racine County. Charitable contributions are generally made to organizations that are defined as "tax exempt" per Section 501(c)(3) of the Internal Revenue Code.

Ends

Racine County will not review a proposal unless the organization accepts full legal, fiscal and administrative responsibility for event or activity being supported.

Racine County accepts and reviews requests on an ongoing basis; however, all requests are subject to approval as part of the budget process. Proposals funded in one year are not always assured of future funding. Grants are subject to the approval of the Annual Executive Budget by the full County Board.

Check the box to indicate that you will fully comply with the Terms of Agreement.

Terms of Agreement Compliance