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# Community Foundation

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of St. Clair County

## EZ-GRANT GUIDELINES

The Community Foundation serves charitable needs and enhances the quality of life in St. Clair County.

### Eligibility:

Your organization must be pre-approved by the Community Foundation to complete the EZ-Grant Application. If you have not been pre-approved, please complete our regular grant application or call 810-984-4761.

### Strategic Priorities 2016-2018

During this next cycle the Foundation will focus its financial and organizational resources on People & Place.

By investing in “People” and “Place” we will pursue tactics and initiatives which will help lead to a healthy and vibrant regional economy---a place to “live, work and play”. Under this philosophy, our discretionary and competitive grant programs will give preference to projects within these priority areas:

#### 1. Community & Economic Prosperity

- Placemaking
- Our downtowns – their vitality and continued revitalization
- Waterfront development & utilization
- Regional collaboration & planning
- Entrepreneurism
- Nonprofit capacity building

#### 2. Cradle to Career

- Emphasis on Skilled trades and apprenticeship programs
- Exploration & preparation for career and lifetime success after K-12
- Childhood literacy
- Pathways to careers in skilled trades
- Hands-on learning & training programs for youth and adults alike, including under-educated or under-trained adults looking for new career options
- Programs & projects to re-engage students who do not complete a college degree in a traditional timeframe or who leave college to explore other options

#### 3. Healthy Lifestyles

- Friday Food & the coordination with feeding older siblings
- Year-round access to healthy foods and necessities
- Greater access to healthy food year-round including summer-time food programs, farmers markets, mobile food trucks, and farm-to-table programs, projects and initiatives, especially those targeting at-risk and neglected segments of our population
- Coordination of efforts aimed at providing basic necessities to school-aged children and a more systematic effort at aiding these support systems year-round
- Programs, projects and initiatives targeting the entire family; their well-being and their success in life and their ability to contribute to our region’s growth and prosperity

Upon completion of this application please email to [derek@stclairfoundation.org](mailto:derek@stclairfoundation.org)

Additional details on the Community Foundation’s Priorities can found on our website: [www.stclairfoundation.org](http://www.stclairfoundation.org)

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## EZ-GRANT APPLICATION

\_\_\_\_\_ Date of Application

Name of Organization Applying: \_\_\_\_\_

Executive Director (superintendent): \_\_\_\_\_

Contact person (if different from Executive Director): \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Project/Program Name: \_\_\_\_\_

Purpose of Grant (one paragraph):

Total Project Cost: \_\_\_\_\_ Amount Requested: \_\_\_\_\_

\_\_\_\_\_  
Signature of Chairperson, Board of Directors, Superintendent Date

\_\_\_\_\_  
Typed Name and Title

\_\_\_\_\_  
Signature of Executive Director, Principal Date

**Required Documents:**

-Project Budget

-If applicant is a school: Letter of support from superintendent that includes why funds are not included in school budget/ how this request fits into the overall school district plan.

**Please provide description/summary of your organization and this grant request. Be sure to tell us how your request addresses one or more of our strategic priority areas. (You may attach additional pages if needed.)**

**How will you proceed if you do not receive funding from the Community Foundation?**

**Program/Project Budget**

**4A** Time period this budget covers \_\_\_\_\_

**4B** \_\_\_\_\_  
Total cost of project

**4C** \_\_\_\_\_  
Amount requested from Community Foundation

**4D** Description of various budget categories (for a large financial request, make up your own more detailed form. (e.g. separate salaries, taxes, fringes or supplies, printing & copying.) In most cases Revenues will equal Expenses, if they are not equal include an explanation.

<b>Revenues:</b>	<b>Committed</b>	<b>Pending</b>
Grants/Contracts/Contributions Local Government		
State Government	\$ _____	\$ _____
Federal Government	\$ _____	\$ _____
Foundations (itemized)	\$ _____	\$ _____
Corporations (itemized)	\$ _____	\$ _____
Individuals (itemized)	\$ _____	\$ _____
Other (specify) _____	\$ _____	\$ _____
_____	\$ _____	\$ _____
Earned Income		
Events	\$ _____	\$ _____
Publications and products	\$ _____	\$ _____
In-kind support (specify)	\$ _____	\$ _____
Other (specify) _____	\$ _____	\$ _____
_____		
Totals for committed and pending:	\$ _____	_____

**TOTAL REVENUES (committed + pending = Total Revenue)**

<b>Expenses:</b>		
Salaries, payroll taxes, fringe benefits	\$ _____	
Consultants and professional fees	\$ _____	
Insurance	\$ _____	
Equipment	\$ _____	
Supplies (printing, copying, telephone, fax, postage)	\$ _____	
Rent, utilities, maintenance	\$ _____	
Evaluation	\$ _____	
Marketing	\$ _____	
Other (specify) _____	\$ _____	

**TOTAL EXPENSES**

*If Revenues do not equal Expenses please provide explanation.*