**Application for Funding – Nonprofit Partner**

**Delray Beach Community Redevelopment Agency**

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| **Section I. ORGANIZATION INFORMATION** |
| 1 Organization Legal Name: |
|  ***dba***, if applicable: |
| 2 Address: |
| 3 Telephone:  | 4 Fax: | 5 Website: |
| 6 Mission Statement:  |
| 7 Executive Leader: |
| 8 Application Contact: | 9 Title: |
| 10 Contact Telephone: | 11 Email: |
| 12 Year Established, Organization History and Growth (maximum 1,000 words): |
| 13 Description/Programs (maximum 1,500 words): |
| 14 Long Term/Strategic Planning Process & Status of Current Plan (attach Plan) (maximum 500 words): |
| 15 Board Roles & Responsibilities (maximum 500 words):  |
| 16 Policy on Board Contributions (maximum 250 words): |
| 17 For current fiscal year, number of Board Members contributing: Cash donations Donations raised from others Volunteer hours In-kind donations |
| 18 For current fiscal year, amount/value of Board member contributions: Cash donations Donations raised from others  Volunteer hours In-kind donations |
| 19 Oversight/Accreditation/Affiliation: |
| **Section II. PROGRAM/PROJECT INFORMATION – *Duplicate section for a second program/project*** |
| 20 Project/Program Title: |
| 21 Prior CRA Funding for Same Project/Program Yes No  | 22 If Yes, Time Period: |
| 23 Delray CRA Overall Need Addressed: |
| 24 Project/Program is New or Existing | 25 If Existing, Year Established:  |
| 26 Goal (maximum 150 words): |
| 27 Documentation of Need for Program/Project (maximum 1,000 words): |
| 28 Description (maximum 500 words): |
| 29 Target Audience or Persons Served (maximum 150 words): |
| 30 Innovative or Proven Approach and Justification (maximum 500 words): |
| 31 Uniqueness, or Justification for Duplication of Similar Area Project/Program (maximum 250 words): |
| 32 Prior Experience with Project/Program or Similar (maximum 250 words): |
| 33 Operating Partnerships (maximum 500 words): |
| 34 Implementation Action Plan/Time Line: |
| 35 Key Staff and Qualifications (maximum 500 words): |
| 36 Potential Challenges and Strategies to Address Them (maximum 500 words): |
| **Section III. FINANCIAL INFORMATION**  |
| 37 **Total Organization Budget:** | Previous FY $ | Current FY $ | Proposed $ |
| 38 Project/Program Budget: $ | 39 Amount Requested: $ | 40 % of Org Budget % |
| 41 Time Period: Program/Project A: | Program/Project B: |
| 42 Type(s) of Support Requested:  |
| 43 Other Support/Status and Plans for Sustainability: |
| **Section IV. APPLICATION CHECKLIST** |
|  | 1. Cover letter signed by Board Chair
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|  | 1. 501(c)(3) IRS Determination Letter
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|  | 1. Board of Directors list with brief bios
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|  | 1. Policy on Board roles & responsibilities, if applicable
 | Title: |
|  | 1. Policy on Board contributions, if applicable
 | Title: |
|  | 1. Strategic Plan or other long term planning document
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|  | 1. Policy on strategic/long term planning, if applicable
 | Title: |
|  | 1. Logic Model(s)
 |  |
|  | 1. Evaluation Plan
 |  |
|  | 1. CRA Combined Budget
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|  | 1. CRA Project/Program Budget Narrative(s)
 |  |
|  | 1. Most recent Financial Statement
 | Time Period:  |
|  | 1. Most recent Form 990
 | Fiscal Year:  |
|  | 1. Most recent Independent Financial Audit
 | Fiscal Year:  |
|  | 1. Affiliation Agreements (if applicable list below):
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|  | 1. Current Balance Sheet as of 5/30/16
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| **Section V. CERTIFICATION STATEMENT AND SIGNATURE** |

As chief executive of the applicant organization I certify that (1) the information provided in this application is correct and complete to the best of my knowledge; (2) I am committed to the purpose of the proposed project or program and will work with Board and staff members to accomplish its stated outcomes; and (3) I will be accountable for compliance with all CRA requirements for operation, evaluation, and reporting.

Executive Leader Name Date Submitted

Title