THIS IS A PREVIEW. DO NOT PRINT THIS OUT AND TURN IT IN. PLEASE USE THE APPLICATION LINK TO BEGIN.

Building for Tomorrow Grant

Kearney Area Community Foundation

Tell us about your project/program

Attention! If you are copying text from another program please make sure to clear formatting and insert with text only!

Project Name*
Name of Project.

Character Limit: 100

Briefly describe the applicant organization, its programs and projects:
Character Limit: 500

Location*
Is your organization's main office/headquarters located in the Kearney area or Buffalo County?

Choices
Yes
No

Brief description of project/program for which you are seeking funds:*
Character Limit: 500

Short description of project (to be used in public communications)*
Please write in the form of a sentence.

Character Limit: 250

Total cost of the proposed project/program (round to nearest dollar):*
Character Limit: 20

Amount requested from Kearney Area Community Foundation (round to nearest dollar)*
Character Limit: 20

Start of funding period:*
Character Limit: 10

End of funding period:*
Character Limit: 10

Check the identified field(s) of interest which best describes this grant:*

Choices

Arts/Culture
Community/Civic
Education
Health
Human Services
Recreation
Religion (non- denominational)

Describe in more detail below if necessary.

Character Limit: 1200

Indicate the field of interest that best describes the purpose of the grant.*

Choices

Arts/Culture
Community/Civic
Economic Development
Education
Health
Human Services
Recreation
Religion (non- denominational)

Type of grant funding*

Please identify the type(s) of grant funding that most closely describes your project.

Choices

Capital projects
Challenge or matching grant
Operational funding for new and/or expanded programs
Seed grant to initiate a new project or program
Unusual or emergency funding

Budget for Project or Program

Revenue

List a brief description of the sources of funds and the budgeted amount for each source. In-kind donations and pending donations should be listed.

Sources of Funds for this Project	Amount

Expenses

List a brief description of the expense and the budgeted amount.

List of Project Expenses	Amount

Please list additional information that may help to understand the above budgetary figures:*

If your organization's headquarters are located outside of the Kearney Area/Buffalo County, please explain how these grant dollars would be spent **only** in the Kearney area/Buffalo County.

Character Limit: 1000

Tell us more about your project/program

PROBLEM/PURPOSE:*

Please establish the need for this project/program. Describe what the project will accomplish. How will it benefit, provide and meet community needs?

Character Limit: 1500

IMPLEMENTATION:*

How will this project be accomplished? By whom, where, when, etc.? Provide numbers and timetable. Please be specific as possible.

Character Limit: 1500

SIZE AND DURATION:*

How many people will you serve? (approximately)

Character Limit: 10

How are people affected by this project and for how long?*

Please include any information on the involvement of the talents of those people who are expected to benefit.

Character Limit: 2000

LONGEVITY:*

Will this project require continued funding?
Is it sustainable? If so, identify the source of this future funding.

Character Limit: 1500

INNOVATION*

How does this project represent an efficient and/or innovative approach to serving community needs and opportunities?

Character Limit: 2500

PARTNERSHIPS & COLLABORATION:*

Has this been done in our community before? Are there other organizations addressing this need in a similar way? What are the efforts within the project to reduce duplication of services as well as strengthen the project/program's presence within the community?

Character Limit: 1500

EVALUATION:*
Once completed, explain how your project has accomplished its purpose? How will it have addressed positive change in our community?

Character Limit: 1500

Measurable Goal*
Character Limit: 500

Document Uploads

Federal Tax Exemption Letter*
Upload a Federal Tax Exemption Letter or a file that explain how the project/ program for which you are applying is a charitable activity. If your organization is tax exempt, an exemption letter is required.

Note: If the Kearney Area Community Foundation or another nonprofit is your fiscal agent, simply upload a one-page document stating that fact.

File Size Limit: 2 MB

Leadership*
Please include the names, titles, daytime phone numbers, and email addresses of your organization's leadership. This includes directors, board officers and/or key volunteers.

File Size Limit: 2 MB

Operating budget (income and expenses) vs. actual for the current and prior year.*
File Size Limit: 3 MB

Financial statements*
Upload financial statements from most recent year-end, include audited statements if available.

File Size Limit: 3 MB

Latest tax return (Form 990) filed with the Internal Revenue Service by the applicant organization.*
If the organization does not have a 990 then please attach a document that explains the reason for not having a 990.

Note: If the Kearney Area Community Foundation or another nonprofit is your fiscal agent, simply upload a one-page document stating that fact.

File Size Limit: 9 MB

Please upload any additional documents you think would be helpful in understanding your project or program

Additional Document 1
File Size Limit: 2 MB

Additional Document 2
File Size Limit: 2 MB

Outside Kearney Area Orgs

Letter of Support*
Please upload a letter of support from your partner organizations or constituents who are local to the Kearney area/Buffalo County.

File Size Limit: 2 MB

Authorized Signature

Agreement*
By signing below I agree that all information provided is true.

Choices
Yes

Applicant Signature*
Character Limit: 250

Signee Title*
Character Limit: 250

Date of Signature*
Character Limit: 10