



2022 Combined Grant Application

**All applications must be postmarked
by Thursday, September 1st, 2022**

Your complete original application and one copy
should be mailed to:

NCCF

PO Box 561

Summersville, WV 26651

and email

the narrative portion (cover sheet, section A, B & C) to:

NCCFWV@GMAIL.COM

PLEASE TYPE ALL APPLICATIONS

For more information on how to complete this grant application and to download
the application, please see the Nicholas County Community Foundation 2022

Grant Application Guidelines at our website, nccfwv.com.

Call (304) 872-0202 or email the Foundation at

nccfwv@gmail.com with any questions.

Received: _____

Reviewed: _____

Nicholas County Community Foundation
 Combined Grant Application
Part 1: Grant Application Cover Sheet

Organization:	Date Established
Address of Organization:	Phone:
City, State, Zip Code:	Fax:
Fiscal Agent/Treasurer:	Project Director:
Email:	Email:
Annual Budget:	Amount Requested:
Project Start Date:	Project End Date:
Area to be Served:	Number of persons to be served/ Target Population:

Title of Project:

Project Purpose: (Briefly summarize the goals and outcomes of this project. Do not exceed the space provided, approximately 200 words)

Part Two Application Check List

Use this checklist to assure your application is complete. All parts of this application should be assembled in the order of the checklist. Please submit **your original application and one copy** to the Nicholas County Community Foundation, PO Box 561, Summersville, WV 26651.

Please paper clip each copy of your application. **No staples, folders or notebooks, please.** If possible, please also email the narrative portion (cover sheet, section A, B & C) to:
NCCFWV@GMAIL.COM

- Part 1:** All parts of the Grant Application Cover Sheet are complete. (Application Page One)
- Part 2:** Completed Application Check List. (Application Page Two)
- Part 3:** Assurances. Attach the signed assurance statements (Application Page Three)
- Part A:** The Purpose of the Grant including each of the five points listed in Part A, is complete. (One Page Maximum)
- Part B:** The Budget and Budget Narrative is complete. Make sure all projected costs are itemized and explained with the funding source listed.
- Part C:** The projected outcomes or goals of the project are clearly listed and you have described your plan to document your progress and results. (One Page Maximum)
- Part D:** Additional attachments to be included:
 - Verification of tax-exempt status or IRS Letter of Designation
 - Organizational Structure
 - List the names and qualifications of those persons who will implement and conduct the project.
 - A copy of the approved minutes or a resolution by the Board authorizing the application. (Teachers must seek written approval from their school's principal.)
 - Financial audit or review from previous two years of your organization.
 - If your project involves working with another organization or institution, please submit a letter of support from that organization or institution (if applicable).
 - Any additional information about your organization (optional).

Assurances

The Applicant hereby assures Nicholas County Community Foundation that:

1. The program will comply with all state statutes and federal law.
2. Appropriate records will be provided to the Nicholas County Community Foundation as needed for fiscal audit and program evaluation.
3. The tax-exempt status of this organization is still in effect.
4. This organization or any of its members has not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract under a public transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property.
5. This organization or any of its members is not presently indicted for or otherwise criminally or civilly charged by a governmental entity (federal, state, or local) with commission of any of the offenses enumerated in item 4.
6. This organization or any of its members has not within a three-year period preceding this application had one or more public transaction (federal, state, or local) terminated for cause or default.
7. The applicant certifies that no grant funds will be used to purchase alcohol or tobacco.
8. The applicant does not discriminate on the basis of race, color, national origin, gender, age or disability.
9. All facilities utilized by the applicant for grant purposes will be accessible to people with disabilities.
10. All notices and invitations to the grant-related events will bear language to the effect that accommodations will be available at the request of the participant. All reasonable accommodations will be made to maximize participation.

Fiscal Agent's/Treasurer's Printed Name

Signature

Date

Project Director's Printed Name

Signature

Date

A. Purpose of grant (*Please submit your answers on this page, keeping your answers to one page*)

1. Specify the need addressed by the project.
2. Describe its significance to the community and its proposed benefit.
3. How will this project have a lasting effect on the community?
4. Does this project provide a unique service?
5. Provide a project schedule (including a timeline for implementation and completion of the project.)

B. Budget and Budget Narrative *(Please submit your answers on this page, keeping your answers to one page)*

1. Briefly summarize expenditures.
2. Please explain your organizations financial need for this project.
3. If the Nicholas County Community Foundation is not funding your entire project please briefly explain your other sources of funding.
4. Use the following format to prepare a project budget. Please refer to the Grant Application Guidelines for a sample project budget.

Budget Item	Funding Purposes and Calculations	Funding Source
Total Requested	\$	
Total Program Budget	\$	

C. Describe the project's proposed measurable outcomes. Outline your plan to document progress and results. How will you measure expected outcomes and the effectiveness of your activities? (Do not exceed one page.)

Be sure to attach all of the required attachments.