



**CITY OF MORRO BAY**

**APPLICATION FOR COMMUNITY GRANT FUNDING**

Name of Agency	
Site Address	
Mailing Address	
Tax ID #	
Contact Person Name and Title	
Contact Person Email	
Contact Person Phone	
Web Address	
Name and title of Executive Director, CEO or President	

**Non-Profit Status**

To be eligible for community grant funding, you must be a registered non-profit organization.  
***Please attach proof of non-profit status to this application.***

**Program/Project For Which Grant Funds Are Being Sought**

Program /Project Name:

Is your program/project open to the public? Yes No

Is your program or project political or religious in nature? Yes No

**I. AGENCY INFORMATION**

**A. General Information**

Grant Request Amount: \$ \_\_\_\_\_

General Agency Information	
Agency's Name	
Year Established	
Number of Paid Full-Time Employees	
Number of Paid Part-Time Employees	
<b><i>* Attach Board Roster and most recent financial statements (or copy of your last tax return (IRS 990)</i></b>	



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#### II. COMMUNITY NEED STATEMENT

**A. Community Need:** Describe briefly the demonstrated need in the Morro Bay community for the program. Cite data sources as appropriate.

**B. Agency Narrative:** Please provide your agency's Mission Statement and Goals, brief history, programs and population(s) served, organizational structure and experience with proposed grant activities. If your organization provides programs countywide, indicate the percentage of Morro Bay residents served.

**C. Local Challenges:** What local challenge or need does this grant address? Identify the target audience and how Morro Bay residents will benefit? Provide estimated percentage of Morro Bay residents that will benefit from this program compared with residents of adjacent areas and / or countywide.



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- D. Program/Project Description:** Please provide project description, including explanation of approach, identified strategies and anticipated outcomes. Please quantify the number of Morro Bay residents to be served, including targeted audience and who benefits from the program. Include a list of planned activities, costs associated, timeline and staff/volunteers responsible for the proposed program. Please provide an outline of how requested grant funds would be spent. Note that documentation of expenditures such as canceled checks, receipts, bank statements, financial statements etc. is required at the end of the grant period, along with a year-end report on expenditures and outcomes. Program expenditures must be completed by June 30<sup>th</sup>. Any funds unexpended by that date must be returned to the City.
- E. Previous Funding:** If your organization has received previous funding from the City of Morro Bay for the proposed project (within the last year), please provide the outcomes in measurable terms and a case example of the grant impact. Please note that prior year reporting requirements must have been met to ensure continued eligibility for City funding.
- F. Collaborative Requests:** If a collaborative request, please provide a description of prior collaborative activities, and proposed responsibilities of collaborative members.



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**G.** Describe how you will promote/advertise your program/project for awareness to the public.

**H.** Describe how your program contributes positively to Morro Bay and aligns with Council goals.

**III. PROGRAM FISCAL INFORMATION**

**A. Program Budget**

Please complete the following summary tables to reflect the budget for your organization and program. All amounts should be rounded to the nearest dollar. Alternatively, please attach single page revenue/expense summary sheets for the program for which funds are requested and a separate summary for the organization.

*Budget Summary*

<b>Budget Data</b>	
Morro Bay grant funding	Requested:
Total <b>Program</b> budget	\$
Total <b>Organization</b> budget	\$



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*Funding Summary*

Revenue Source		Program Budget
Morro Bay grant request:		\$
Other municipal funding (please specify: )		\$
County funding (please specify:)		\$
State funding (please specify:)		\$
Federal funding (please specify:)		\$
Fees for services		\$
Donations		\$
Reserve contingency fund		\$
All other sources (please specify:)		\$
	<b>Total</b>	<b>\$</b>

**B. Organization Contracts:** Has your organization ever had funds withdrawn or a contract terminated for cause, unsatisfactory performance, or questionable costs on any financial statements or audit? If so, please describe.

**C. Travel Expense Disclosure:** If Community Grant funds are to be used for staff travel expenses, please provide the anticipated expense breakdown for registration, transportation, hotel, and/or food. Please note alcohol is not an allowable expense for grant funds.



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- D. Eligibility information:** to be eligible for award of a community grant, agencies must:
1. Submit only one, completed application form.
  2. Be a registered tax-exempt non-profit corporation (IRS 501-C) at the time of application.
  3. Demonstrate the managerial and financial capability to receive and expend funds.
  4. Assure compliance with all applicable local, state, and federal laws including but not limited to non-discrimination requirements.
  5. Must have submitted all required year-end reports for City grant fund expenditures for prior year(s) in a timely and complete manner, if applicable.
- E. Required attachments:** Please attach the following to your application:
- a. Agency/Organization Board Roster
  - b. Most recent financial statement(s) or a copy of the agency/organization's last tax return (IRS 990)
  - c. IRS Determination Letter (confirming approval of 501(c) status)  
<https://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>)
  - d. Copy of current (active) status of organization from Secretary of State of California authorizing the organization to transact business  
<https://bizfileonline.sos.ca.gov/search/business>)
  - e. Attach additional pages, as needed. Please keep to a 2-page maximum.



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**CERTIFICATION**

The applicant hereby proposes to provide the services as listed in this proposal. If this proposal is approved and funded, it is agreed that relevant federal, state, and local regulations, including nondiscrimination laws and other assurances as required by the City of Morro Bay, will be adhered to. Furthermore, I certify that the applicant is fully capable of fulfilling its obligation under this proposal as stated herein.

Grantee agrees to provide immediate written notice to the City if significant changes or events occur during the term of this award which could potentially impact the progress or outcome of the grant, including without limitation, changes in Grantee management personnel or losses of funding.

This grant is requested with the understanding that the City has no obligations to provide any, other or additional support or grants to the Grantee.

This grant is requested for programming that will be completed (and funds expended) by June 30th, and the applicant understands that, if awarded, funds not expended by that date are subject to return to the City.

The end-of-the-year report shall be in writing and submitted by July 31<sup>st</sup> following the close of the fiscal year in which funds were awarded.

On behalf of the applicant organization, I understand and agree to the foregoing terms and conditions of the City's grant, and I hereby certify and attest to my authority to execute this agreement on Applicant's behalf.

This application and the information contained herein are true and correct and complete, to the best of my knowledge.

Date: \_\_\_\_\_

\_\_\_\_\_  
Organization Name

\_\_\_\_\_  
Executive Director

\_\_\_\_\_  
(Print Name)