PROGRAM/GENERAL OPERATING/COVID-19 RELIEF GRANT APPLICATION:

Due to the COVID-19 crisis, the Community Foundation of Collier County has revised its grants process to make current grants as unrestricted as possible, so our nonprofit partners have maximum flexibility to respond to the crisis. CFCC is directing all possible unrestricted dollars into the grant pool, in order to have more funds available to grant. Please note the following:

• Organizations & Programs must demonstrate strong measurable outcomes.
• Please contact Laura Simmelink prior to beginning an application if you have any questions about whether your program is eligible.

These grant awards range from $5,000 - $15,000. In response to the COVID-19 crisis.

To be eligible for this grant you must be able to answer YES to the following questions:

Is your organization a 501(c)3 nonprofit?
Does your organization serve Collier County residents?

*This copy is meant to be used as a preview of the grant questions. Please record your responses in the online application only.*

Organization Name:

Name and title of contact person for this grant request:

Telephone:

Email Address:

Name of Executive Director/CEO:

Email address of Executive Director/CEO:

Organization’s federal tax-exempt number (EIN):

Mission statement: Please state your mission in two sentences or less.

Description of your Organization: Please provide a brief description/summary of your organization.
Have you applied for Federal or State loans related to COVID-19? If so, for how much, and how much did you receive? It is recommended to share if your organization has applied for Federal or State loans related to COVID-19.

Other emergency funding? Have you received, applied for, or intend to apply for other emergency funds? If so, please describe what you have requested or have been awarded to date.

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Program/Project Name (if request is for a project rather than general operating support; if not write N/A):

Requested Funding Area (choose ONE): Arts/Environment, Education/Employment, Health/Mental Health, Human Services/Housing.

Total Project Cost (if request is for a project rather than general operating support; if not write N/A):

Amount requested for CFCC:

Program Description(s): Please describe the project this grant fund will help support. If you are applying for general operating support due to COVID-19, you may write “N/A”

Statement of Needs – Briefly describe the need for your work using data, income status, and demographics, etc.

Project/Funding Start & End Dates:

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Briefly describe the overall impact of COVID-19 on your organization. (Example: cancellation of fundraising events, increased demand for services, need for more staff, etc.)

How will this investment help you sustain your organization now and post COVID-19?

What results are you committed to achieving during this time?

How will you track and measure those results?

How will you monitor the use of the requested funds?

ATTACHMENTS: Expected Outcomes, Nonprofit Financial Statement, Program Budget (if applicable) Please use our forms, found on the Apply For Grants page of our website.

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