



## ***CFHC 2017 Grant Guidelines and Application***

The CFHC Grant program assists a wide range of organizations, whose programs benefit human services, children, education, health and safety, community development, the environment, and arts and culture. **The program provides one-year grants of up to \$1,000 for specific programmatic, operational, or staff projects.** Grants are given to nonprofit organizations providing services in Harford County, Maryland. **In 2017, funds are available for programs that serve children; provide care for animals, Feline care, serve people who are homeless; address hunger; provide respite care, and serve other general charitable purposes.**

### **ELIGIBILITY REQUIREMENTS**

- Must be a 501(c)(3) organization providing services in Harford County
- Grant funds must be used to provide services in Harford County
- Grant funds may be used for specific programmatic, operational, or staff projects
- Projects requesting funding must begin after May 1, 2017. Retroactive funding will not be given.
- Only complete proposals will be reviewed
- **Previous grant recipients must complete a final grant report to be eligible to apply in 2017**

### **APPLICATION REQUIREMENTS (one copy of each item)**

- Completed Grant application form, **not to exceed 3 pages, including project budget details**
- Cover letter on organizational letterhead, signed by the Executive Director, summarizing the grant request, the organization's mission, and past funding received from CFHC (if any)
- Organization's 501(c)(3) determination letter from the Internal Revenue Service
- List of Board members and Executive staff
- Current year operating budget

### **DEADLINE: Applications must be RECEIVED by April 14, 2017.**

Applications must be submitted via email or postal mail. Faxed proposals will not be accepted.

**Postal Address:** Community Foundation of Harford County  
PO Box 612  
Bel Air, MD 21014

**Email:** [cfharfordcounty@comcast.net](mailto:cfharfordcounty@comcast.net)  
**Subject line:** 2017 Grants

### **ADDITIONAL INFORMATION**

Eligible applicants receiving a grant award from the Community Foundation of Harford County (CFHC) may only use grant funds for charitable purposes as stated in the proposal. CFHC has the authority to withhold and/or recover grant funds if at any time grant funds are misused. CFHC will investigate allegations of improper use of grant funds for the private benefit of donor-advisors.

Each grantee must enter into an agreement with CFHC and must provide a financial and narrative report at the project's end. Organizations may contact the Community Foundation with questions, 443-371-6062 or [cfharfordcounty@comcast.net](mailto:cfharfordcounty@comcast.net). Grants are anticipated to be awarded in June 2017.



***CFHC Grant Application***  
*Deadline: received by April 14, 2017*  
**Grant request up to \$1,000**

**Applicants must complete this form. The form may be reproduced electronically following a similar format. Please type, using 12-point font. Do not exceed 3 pages. Place organization name at the top of each page. Do not staple or bind.**

**Organization's Legal Name:**

**Address:**

**Phone Number:**

**Website:**

**Contact Person and title:**

**Contact Phone and Email:**

**Project/Program Title:**

**Amount requested:**

**Total project/program budget:**

**Total organization operating budget:**

- 1) Describe the reason for this request and specify how the money will be used. Include a description of the project/program, how the project/program will be implemented and evaluated, and a timetable for implementation. (1-3 paragraphs)
- 2) Describe the constituency or population to be served by this grant, including ages, projected numbers, location, etc. (3-4 sentences)
- 3) Provide a project/program budget, detailing revenue and expenses. List all funding sources (received, pending, or planned) for this project/program. List all project/program expenses. Clearly itemize the expenses the mini-grant will cover. A suggested format is shown below:

Revenue Item	Amount	Description
1	\$	
2	\$	
Expense Item	Amount	Description
1	\$	
2	\$	

- 4) Describe how this project/program supports your organization's mission. (3-4 sentences)

Name and title of individual authorized to sign:

Signature of individual authorized to sign:

Date: