

Western Lane Community Foundation

## Grant Instructions

Applications are available at [www.wlcfonline.org](http://www.wlcfonline.org) after October 1st.

**Completed applications must be postmarked, emailed or received at WLCF by 5pm on January 15<sup>th</sup>.**

Incomplete and/or late applications WILL NOT be considered.

Applications must include all the materials listed below and arranged in the following order.

1. WLCF Application Form (completed and signed)
2. Project Budget
3. Organization's Current fiscal year budget (nonprofits only)
4. List of current board of directors (nonprofits only)

If you wish to submit letters of support or additional information, please attach to the end of the application materials.

You may return your application materials by mail postmarked no later than January 15<sup>th</sup> to:

- Western Lane Community Foundation ~ P.O. Box 1589 ~ Florence OR 97439

You may prefer to email your application materials (pdf). Email no later than January 15<sup>th</sup> to:

- [wlcf@wlcfonline.org](mailto:wlcf@wlcfonline.org)

Review the Grant Guidelines on our website

[Grant Guidelines - Adopted by the WLCF Board on July 21 2021.pdf \(wlcfonline.org\)](#)  
for guidance on completing the Grant Application.

Your Grant Application will be reviewed using the following weighted criteria:

- 40% for Project Goals/Impact;
- 30% for Alignment with WLCF Mission/Vision;
- 30% for the Financial & Organizational health of your organization.

Past awards are no guarantee of future funding. You will be contacted by a member of our board for further information about your grant request once the review process is underway.

If you are awarded a grant, you will be required to file a Grant Activity Final Report by September 30<sup>th</sup> of the grant year. If you fail to return the Grant Activity Report, your organization will not be able to apply for future grants until the report is submitted.

## Grant Application

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ORGANIZATION INFORMATION	Name of Organization:			
	Mailing Address:			
	Street Address:			
	Daytime Phone:			
	Description of Organization:			
	Organization's Mission/Vision Statement:			
	CEO/Board Chair/Executive Director Name:			
	CEO/Board Chair/Executive Director Email:			
	Year Organization Founded:		Tax ID Number:	
	Is this Organization a 501(c)(3) Corporation?			
	If not a 501(c)(3) Corporation, what is the structure of the organization?			
	I certify that all the information included in this application packet is accurate and complete. I understand that if funds are awarded, I am responsible for submitting a completed grant activity report by September 30 <sup>th</sup> or I will ensure all grants funds are returned to WLCF.			
	Name of Person Signing:		Title of Person Signing:	
	Signature:			

PROGRAM OR PROJECT INFORMATION	Contact Person Name:		Title:		
	Daytime Phone:		Email:		
	Name of Program or Project:				
	Program or Project Summary:				
	Primary City/Town Served:				
	Name of Target Population:				
	Total Program/Project Budget:		Amount Requested:		
	Project Start Date (mm/dd/yyyy):		Project End Date:		
	Percent of where program or project beneficiaries reside? (use decimal, e.g. .25 for 25%)				
	Florence:	Mapleton:	Deadwood:	Dunes City:	Other:

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### Proposal Information

1. How will the grant funds be used?

- Special program or project
- One-time capital project expenditure
- Operating support

2. Which one best describes your program or project:

- Cultural
- Medicine/Science
- Education
- Social and/or Civic Services
- Other, please specify

3. What is the goal of this program or project? In other words, what is the outcome you desire?

4. What community need will this grant address?

5. How will this program or project align with the mission/vision statements of WLCF?

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6. **WLCF encourages collaboration.** Are there other groups in our community with the same or similar mission or purpose? Please list and provide the details on the contact you have made and any effort to coordinate your program or project with them, or your reasons for not doing so.

7. Please list all projects or programs and related funds you have received from WLCF in the last five years.

8. How is this program or project different from past funded programs or projects?

9. WLCF awards grant funds that are provided through community donations. If awarded, how would you publicly recognize WLCF for helping to fund your program or project?

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10. Please **attach** your program or project budget that includes the name of all sources of revenue and their contribution (anticipated or secured) as well as a detailed explanation of all expenses.
11. Please **attach** your organization's current fiscal year budget (*nonprofits only*).
12. Please **attach** your organization's list of current board members. Please indicate board officers, how long each member has served, and how often the board meets (*nonprofits only*).
13. Please describe the structure of your organization. What has your organization done in the past year for which you are most proud?

14. Finally, is this program or project going to require ongoing funding? If yes, how will it be funded in the future? Please be very specific.

Thank you for completing this application in its entirety. Be sure to keep a copy for your records before sending to us ... postmarked, emailed or received by 5pm on January 15<sup>th</sup>. Remember, incomplete or late applications will not be considered.