

**CORAL GABLES CONGREGATIONAL CHURCH
UNITED CHURCH OF CHRIST
COMMUNITY RELATIONS AND GRANTS
PROGRAM GUIDELINES**

	FIRST FUNDING CYCLE	SECOND FUNDING CYCLE	THIRD FUNDING CYCLE	FOURTH FUNDING CYCLE
APPLICATION DEADLINE	FIRST TUESDAY OF OCTOBER BY 5 PM	FIRST TUESDAY OF JANUARY BY 5 PM	FIRST TUESDAY OF APRIL BY 5 PM	FIRST TUESDAY OF JULY BY 5 PM
FUNDS PROJECTS WITH ACTIVITY DATES BEGINNING	JANUARY 1- MARCH 31	APRIL 1- JUNE 30	JULY 1- SEPTEMBER 30	OCTOBER 1- DECEMBER 31
COMMITTEE RECOMMENDATIONS*	FIRST TUESDAY OF NOVEMBER	FIRST TUESDAY OF FEBRUARY	FIRST TUESDAY OF MAY	FIRST TUESDAY OF AUGUST

*NOTE: COMMITTEE MEETING DATE SUBJECT TO CHANGE.

Submit completed application packages and all required copies by **5 PM** on the deadline date to:

**Grants Program Administrator
Coral Gables Congregational Church
United Church of Christ
3010 De Soto Boulevard
Coral Gables, Florida 33134**

Applications are available by calling (305) 448-7421.

PROGRAM OBJECTIVE & ELIGIBILITY

The Community Relations and Grants Program reflects the mission of the Coral Gables Congregational Church (CGCC), which is to provide a spiritual home for a diverse and inclusive congregation actively seeking to spread God's love. The program is responsive on a quarterly basis to not-for-profit organizations, legally incorporated or otherwise, which are developing community-based programs, projects and events, particularly in the social services, education, environment and arts. An organization may apply only once during the calendar year. For-profit or commercial organizations may not apply. A grant from the Church carries no commitment for future support beyond the time of the program, project or event.

FUNDING REQUEST CAPS

This program will consider requests up to \$3,000 contingent upon finalized and approved budget. The application form can be obtained by calling (305) 448-7421.

EVALUATION CRITERIA

The appropriateness for funding of the proposed program, project or event will be determined according to the Community Grants Program goals as stated below:

- 1) To support responsive programs, projects, or events which promote community-based social services, educational and cultural outreach in our multiethnic community;
- 2) The budget will be examined as to need and specific expenditures;
- 3) To support programs, projects or events in the under-served geographic locations of Miami-Dade County;
- 4) To support programs which demonstrate direct or strong involvement on behalf of CGCC members and/or pastors. Please include a letter of support from church member, if applicable.
- 5) To support programs, projects or events which display a reliable degree of administrative capability in terms of scope, budget, individuals and organizations involved;
- 6) To comply with grants requirements, including timely submission of Final Reports for applicants who have received previous funding from the Coral Gables Congregational Church.
- 7) Incomplete applications will not be considered.

It is the mandate and responsibility of the Community Relations and Grants Committee to evaluate all proposals based on the above-stated criteria.

DEADLINES

Applications must be received in the quarter corresponding to the dates of the proposed activity. Your original application and all required copies must be received at the Church office no later than **5 PM** on the deadline date. Postmark dates or applications transmitted by fax are not acceptable. Please refer to the calendar on the first page of this document.

APPLICATION INSTRUCTIONS

Submit the signed original plus six copies of the completed application form with the original so designated. Each application should abide by the following guidelines:

- Do submit an application in a type size no smaller than 12 point. Provide no more than three support documents per application.
- Do list as the contact person and/or grantwriter an individual who is knowledgeable about the project, organization and budget and who can be reached during office hours (Mon-Fri: 9:00 am - 5:00 pm).
- Do answer all questions completely. If a question does not apply to your organization, mark "n/a" or "not applicable."

- ❑ Do clip or staple all pages and support material together at the upper left hand corner. Please avoid using cover pages, cover letters, or divider pages as it makes our review process more difficult.
- ❑ Do make certain your complete submission is **received at the church office no later than 5 pm** on the deadline date.
- ❑ Do keep a copy of the completed application for your records.
- ❑ Don't transmit your application by fax or e-mail.
- ❑ Don't substitute application with a computer generated form.
- ❑ Incomplete applications will not be accepted.

APPLICATION REVIEW PROCESS

- 1) Applicants will be notified of award by mail following the Committee's decision. The grant award package will include a letter of agreement and instructions for proper completion. These documents must be properly completed before the grant award recommendation can be processed. Please allow up to eight weeks for distribution of grant awards.
- 2) Grant checks will be mailed directly to the address indicated on the grant application form.

GRANT COMPLIANCE REQUIREMENTS

An updated project narrative is required within forty-five (45) days of your stated project completion date. Specific instructions regarding this narrative will be included in the award letter. In the unlikely event that the funded project does not come to fruition, it is expected that the rewarded funds would be returned to Coral Gables Congregational Church.

Grant recipients may be requested to give a Moment of Mission at a Coral Gables Congregational Church service. The Moment of Mission is a five minute presentation before the congregation regarding the organization and the project sponsored by the award.

All funded activities must provide equal access and equal opportunity in employment and services and may not discriminate on the basis of disability, race or ethnicity, color, creed, national origin, religion, age, gender, or sexual preference, in accordance with Title VI and Title VII of the Civil Rights Act of 1964, the Age Discrimination Act of 1975 and Title IX of the Education Amendments of 1972 as amended (42 U.S.C. 2000d et seq.), the Americans with Disabilities Act (ADA) of 1990, and Section 504 of the Rehabilitation Act of 1973.

Grantees must include the following credit line in all promotional and marketing materials related to this grant including news releases, public announcements, press releases, print and broadcast media: ***"With the support of the Coral Gables Congregational Church"***.

PROGRAM FUNDING APPLICATION

CORAL GABLES CONGREGATIONAL CHURCH

UNITED CHURCH OF CHRIST

3010 De Soto Boulevard Coral Gables, FL 33134

Phone: (305) 448-7421

TELL US ABOUT YOUR NOT-FOR-PROFIT ORGANIZATION

Organization Name:		501-C3: Y/N	Fed ID #:
Address:			
City:		State:	Zip:
Contact Name:		Contact Title:	
Contact Phone:		Email:	
Grant Writer Name:		Title:	
Grant Writer Phone:		Email:	
Website:			

TELL US ABOUT YOUR PROJECT

Project Title:	
Location of Activities/Services:	
Dates of Activities/Services:	
Expected Number of Participants:	
Target Population:	
Amount of Grant Request: (up to \$3000)	\$

CORAL GABLES CONGREGATIONAL CHURCH (CGCC) AFFILIATION

Are there any CGCC members that participate as leaders or volunteers in your organization?	Yes / No
If yes, please provide the name(s) and a <u>Letter of Support</u> from the referenced member(s) :	
Is this project affiliated with the United Church of Christ?	Yes / No
Have you submitted grant requests to CGCC before?	Yes / No
Has CGCC funded any of your programs before?	Yes / No
If yes, tell us which programs:	

ORGANIZATION DESCRIPTION

Please tell us about the organization applying for financial support.

- A) Mission Statement
- B) Organizational Chart
- C) Briefly describe two projects that your organization has developed and implemented in the last five years.

PROJECT DESCRIPTION

Please tell us about the project to be considered for financial support. (no more than three pages)

- A) List the Project goals.
- B) Describe the Activities/Services.
- C) Detail how the grant money will be used.
- D) Describe how this Project will impact your organization.
- E) Explain who will benefit from this grant.
- F) Describe any impact of previous CGCC grants (if applicable).
- G) Additional comments.

Please attach a Financial Statement or IRS Form 990 to each application

I certify that all information provided is true and accurate

Signature:		Date:	
Printed Name:		Title:	