Community Grant Applications

- One-time grant application for non-profits
- o 2-year sustaining grant application for non-profits
- o Innovation grant application for community members

TOWN OF LOS GATOS COMMUNITY GRANTS APPLICATION ONE-TIME GRANTS FOR NON-PROFITS FISCAL YEAR 20XX/20XX



Instructions

Applicant Information

- The Town will consider funding requests for programmatic grants from local, non-profit organizations for new programs that bring a positive impact to the residents of Los Gatos in any one of the categories of Arts, Community Vitality, Education, Events, or Human Services.
- Applications are limited to one per organization, per year.
- All applications must be completed in full and submitted no later than 5:00 p.m. on *date* to be considered.
- Completed applications must be submitted electronically by Town Seamless Docs via Town's website at *link*.

Organization:		
Mailing Address:		
Program Coordinator:		
Contact Email:		
Contact Phone:		
Organization's EIN#:	CA Registry of	
	Charitable Trust	ts #:
Program Title:		
Amount of Grant Funding	Requested (not to exceed \$x,xxx):	
Have you received any To	wn of Los Gatos Community Grants in	the past?
Choose one of the following categories for your proposal (Arts, Community Vitality,		
Education, Events, Human Services):		
Program proposal		
Please provide a one sentence summary of your proposed program (what, when, how, why,		
and for whom?) (max 100 words):		

Please fully describe your proposed program and how you plan to accomplish it:		

Organizational Background	
Please give a brief description of the overview and mission of your organiza to the proposed project:	tion as it relates
to the proposed project.	
Budget	
What is your organization's total annual operating budget?	
What is the total estimated budget for this proposed program?	
What sources of funding have you identified to cover additional costs of this	s program not
covered by a Town of Los Gatos Community Grant?	
Please give a breakdown of your program budget explaining how Communi	ty Grant funds will
be spent:	

Community Impact and Outcomes		
Who is your target audience for the program?		
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How many people will your program serve? Describe how you identified a community need and the impact your program	will have in addressing	
that need:	wiii nave iii adaressiiig	
How would you define success for your program in terms of outcomes and what a gauge these outcomes?	nat methods will you use	
to gauge those outcomes?		
Sustainability		
Please describe how you plan to sustain the program in the future. If this prog	gram is designed to	
terminate by the end of the grant cycle, please explain your rational in this decision:		
Cortifications		
Certifications – please initial in the boxes I certify that the organization requesting funding is a currently regis	tered non-profit	
	·	
I certify that our organization will provide a grant report and receipt quarterly basis.	ts to the Town on a	
I certify that the information provided in this application is true and	correct to the best of	
my knowledge.		
Signatures		
Program Coordinator:	Date:	
(Name Printed):		
	Date	
Organization's Director:	Date:	
(Name Printed):		

TOWN OF LOS GATOS COMMUNITY GRANTS APPLICATION SUSTAINING GRANTS (2 YEAR FUNDING) FISCAL YEARS 20XX/20XX AND 20XX/20XX



Instructions

- Sustaining grants are available only to non-profit organizations addressing human services needs that have received consistent and uninterrupted Town Community Grant funding for a single program for the last five or more years. Please confirm your eligibility with *Staff person contact* prior to using this application.
- Applications are limited to one per organization, per year.
- All applications must be completed in full and submitted no later than 5:00 p.m. on *date* to be considered.
- Completed applications must be submitted electronically by Town Seamless Docs via Town's website at *link*.

Applicant information			
Organization:			
Mailing Address:			
Program Coordinator:			
Contact Email:			
Contact Phone:			
Organization's EIN#:	CA Registry of		
	Charitable Trust	:s #:	
Program Title:			
Amount of Grant Funding	Requested (not to exceed \$x,xxx):		
Program proposal	Program proposal		
Please provide a one sente and for whom?) (max 100	ence summary of your proposed progra words):	m (what, when, how, why,	

Please fully describe your proposed program and how you plan to accomplish it. Please
identify any changes you are making to the program based on lessons learned from previous
years?

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Organizational Background
Please give a brief description of the overview and mission of your organization as it relates to the proposed project. Please describe your organization's current capacity to continue this project:
Budget
What is your organization's total annual operating budget?
What is the total estimated budget for this proposed program?
What sources of funding have you identified to cover additional costs of this program not covered by a Town of Los Gatos Community Grant?
Please give a breakdown of your program budget explaining how Community Grant funds will be spent:

Community Impact ar	nd Outcomes		
Who is your target audience	for the program?		
How many people will your	program serve?		
Describe how you identified		the impact your program	will have in addressing
that need:			
How would you define succe	ess for your program in	terms of outcomes and wl	hat methods will you use
to gauge those outcomes?			
Certifications – please ini	itial in the boxes		
I certify that the o	rganization requesting	funding is a currently regis	tered non-profit.
	rganization will provide	e a grant report and receip	ts to the Town on a
quarterly basis.	nformation provided in	this application is true and	correct to the hest of
my knowledge.	normation provided in	tins application is true uno	redirect to the best of
Signatures			
Program Coordinator:			Date:
(Name Printed):			
Organization's Director:			Date:
(Name Printed):	_		

TOWN OF LOS GATOS COMMUNITY GRANTS APPLICATION INNOVATION GRANTS FOR COMMUNITY MEMBERS FISCAL YEAR 20XX/20XX



Instructions

Applicant Information

- The Town offers *four* small grants per year in the set amount of *\$1,500* to individual community members in order to assist in developing and launching a new project idea that benefits the community of Los Gatos.
- The applicant may not apply for this grant on behalf on another organization.
- Applications are limited to one per person, per year.
- All applications must be completed in full and submitted no later than 5:00 p.m. on *date* to be considered.
- Completed applications must be submitted electronically by Town Seamless Docs via Town's website at *link*.

Name:	
Mailing Address:	
Contact Email:	
Contact Phone:	
Program Title:	
Have you received any To	wn of Los Gatos Community Grants in the past?
Project proposal	
Please provide a one sente	ence summary of your proposed project (what, when, how, why,
and for whom?) (max 100	words):

Please fully describe your proposed project and how you plan to accomplish it:		

Applicant Background	Applicant Background		
Please give a brief descrip	tion of why you are qualified to undertake t	his project.	
Community Impact ar	nd Outcomes		
	a community need and the impact your program	n will have in addressing	
How would you define succe to gauge those outcomes?	ess for your program in terms of outcomes and v	what methods will you use	
Sustainability			
	in to sustain the program in the future. If this pr grant cycle, please explain your rational in this o	_	
Certifications – please in	itial in the boxes		
I certify that I will provide a grant report and receipts to the Town at the end of the grant cycle. I certify that the information provided in this application is true and correct to the best of my knowledge.			
Signatures			
Applicant Signature:		Date:	
(Name Printed):			