**Welcome to the Douglas County Community Grant Program for FY 2024-2025!**

To qualify for funding, an organization is required to submit a completed application to Douglas County by 11:59 PM, March 29, 2024.

Make sure that you have reviewed the grant requirements on the Douglas County website thoroughly: https://www.douglascountynv.gov/communitygrant.

**What are Community Grants?**

Under Nevada law, the Board of County Commissioners may award grant funding to non-profit community organizations that provide a substantial benefit to the residents of the County.

NRS 244.1505 states that a Board of County Commissioners may grant or donate monies to a non-profit organization created for religious, charitable, or educational purposes, or to a government entity, for any purpose which will provide a substantial benefit to the inhabitants of the County. These grants must be awarded by resolution.

To qualify for funding an organization is required to submit a completed application to Douglas County with the following:

* Organization information (i.e. history, mission, geographical area served)
* Organization’s financial information (i.e. availability of alternate funding, financial statements)
* Information regarding the program/project the requested funding will be used for
* The results achieved from any prior year’s grant funding that was received (if applicable)

**Completed applications will be accepted by one of the following methods.**

Electronic:

Email: Community\_Grant@douglasnv.us

In Person:

County Manager’s Office

Attn: Community Grant Program

1594 Esmeralda Avenue

Minden, NV

89423

Mail (**Must be received by March 29, 2024**):

Douglas County, NV

Attn: Community Grant Program

County Manager’s Office

PO Box 218

Minden, NV 89423

**Section I: Organization Contact Information**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Organization Name |  | | | | | | | |
| Address |  | | | | | | |
| Physical Address if PO Box is used |  | | | | | | |
| City |  | | | State |  | Zip |  |
| Phone |  | Email |  | | | | |
| Contact Authorized Representative |  | Title |  | | | | |
| Contact – Grant matters |  | Title |  | | | | |
| Website |  | | | | | | |

Organization type:

* Service Club
* Non-profit 501(c)(3) (Required: attach certification letter)
* Agency, Type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please provide the organization’s mission statement:

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Provide a brief history of the organization and the organization’s service to Douglas County:

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Describe the use of volunteers within the organization and how they apply to the program/project (Show volunteers on organizational chart):

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Does the organization have any paid staff members, to include outsourced positions, involved in the program/project? If so, please provide a brief description (Show paid staff on organizational chart):

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**Section II: Project Summary**

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| --- | --- |
| Project Name: |  |
| Geographic Area Served: |  |
| Population Targeted: |  |

Describe in detail the program/project for which the organization is requesting funding:

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Please describe how these funds will be used to serve specifically Douglas County residents:

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How does the program/project align with Douglas County’s strategic plan, mission and values statement? (see page 4 of the Douglas County Strategic Plan)

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How will the organization measure the success of the program/project? (Quantifiable information)

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How will the project continue to be funded without Community Grant funding going forward?

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**Section III: Funding Request**

Requested Grant Amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Match Amount: ­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Project Total: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Budget Template:

|  |  |  |
| --- | --- | --- |
| **Expenditures** | **Description** | **Amount** |
| Salary and Wages  (New projects or to enhance existing programs) |  |  |
| Equipment |  |  |
| Materials and Supplies |  |  |
| Travel/Training |  |  |
| Other: |  |  |
| Other: |  |  |
| Match: |  |  |
| **Project TOTAL** | |  |

*Insert additional rows if needed.*

**Section IV: Results of Prior Year Grant Award (if applicable)**

Only complete this section if you received grant funding from Douglas County’s Community Grant in a prior year.

Have you received grant funding from Douglas County’s Community Grant in a prior year?

* Yes
* No

What is the most recent year the organization received the Douglas County’s Community Grant?

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What amount was awarded that year?

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Describe the specific program(s)/services for which prior year’s grant funds were used.

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**Section V: Assurances**

The following documents are required to be attached to the application:

* organizational chart
* most recent Federal Income Tax Return or 990
* most recent Financial Statement
* the organization’s approved budget
* IRS non-profit determination letter
* completed Assurances Signature document

**STOP HERE – TO BE COMPLETED BY COUNTY STAFF**

|  |  |
| --- | --- |
| Date/Time Received: |  |
| Initials: |  |
| Notes: |  |