

Post Project/Event Form

To be completed and submitted within 30 days after the project/event has been completed along with the Grant Claim Form and receipts for reimbursement.

| Organization: |
|---|
| Event/Project Name: |
| Submitted By: |
| Date of Submission: |
| Please list (or attach) the results from the evaluation methods you described on your application form. |
| What positive benefits did your project/event have on our community? If applicable, how did this year's project/event compare to previous year's project/event? |
| How will you apply your learning to your organization's future project/event? |

Documentation: Please attach a sample of your promotional materials for the project/event.



Please number your receipt to correspond with your listing below. Receipts/Invoices with proof of payment for eligible expenses must indicate items was paid (e.g. cancelled check, cashiers tape, etc.)

| Receipt | Company | Item(s) | Amount |
|---------|---------|---------|--------|
| # | | | |
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |
| 6 | | | |
| 7 | | | |
| 8 | | | |
| 9 | | | |
| 10 | | | |
| 11 | | | |
| 12 | | | |
| 13 | | | |
| 14 | | | ` |
| 15 | | | ` |
| | | Total | |

If you have additional expenses that do not fit in the above table, please provide an attachment of those expenses.

| All grant claims must be submitted within 30 days of the completed event or project. All grant clai submitted on or before September 30 th of the year the grant was awarded. | | | | |
|--|-------|--|--|--|
| Name (please print) | Date | | | |
| Signature | Title | | | |



Project Grant FY 2018 Project Grant Application

The Community Grant program is designed to support community-based projects for new and developing organizations and established organizations that work on a project basis, and organizations undertaking a special, one-time initiative. The projects must assist the City to fulfil its mission statement and accomplish strategic goals.

City Staff are available to review your application prior to the deadline. It is highly advisable to speak to City staff as early as possible about your application. Answer all questions on the form concisely and include all of the requested supporting materials – use the provided checklist to ensure that your application is complete.

All recipients of the City of Excelsior Springs Project Grant will be required to submit a Post Project/Event Form within 30 days of the completed project.

All applicants must submit their application by the deadline and all applicants will be notified of awards prior to the grant fiscal year beginning on October 1st of the corresponding year.

Please direct all questions regarding the Project Grants to Susan Conyers, 816-630-0752 or sconyers@ci.excelsior-springs.mo.us.

Submit completed applications to:

City of Excelsior Springs Attn: Molly McGovern 201 E. Broadway Excelsior Springs, MO 64024

Disclaimer: Successful grant applications will be made public. Please note to further our goal of open and transparent government, the City of Excelsior Springs will publish all successful grant applications on our public website. To protect the confidentiality of your organization and volunteers, the applicant information, the declaration and supporting documentation for each grant will not be included on the website.



Project Grant Program Guidelines

- Objective of the Project Grant Program
- To encourage projects which contribute to the community life of the City of Excelsior Springs

Who May Apply

- Excelsior Springs based organizations that are non-profits
- Community organizations whose projects meet the current conditions and criteria
- Funding will be provided on a cost-shared basis with the balance coming from partnerships and fundraising activities undertaken by the applicant
- The project must show specific benefit to the City and its residents
- The project must be completed within the year that funding is approved
- To be eligible for funding, events, projects or services proposed by organizations must support strong social and community values and not be offensive to others

Types of Eligible Projects

- New or special programs, events and initiatives
- Community workshops or seminars
- Seed money for new initiatives
- Specialized equipment

Types of Projects NOT Eligible

- Ongoing operating expenses for organizations
- Travel
- Direct grants to individual residents
- For-profit organizations
- Projects based in other municipalities

Payment of Grants/Evaluation

- Funding will be forwarded upon completion of the project and receipt of acceptable verification of payment and expenses, along with a brief report/evaluation please use the Post Project/Event Form.
- Grants are paid upon receipt of validation that expenditures have been made relating to the approved project (e.g. receipts, registration confirmation, cancelled checks).
- Receipts can be submitted for reimbursement at any time throughout the year.
- The final deadline for submission of receipts and evaluations is 30 days after the projects completion or September 30 of the award year. Receipts submitted after this date or after the 30 days will not be reimbursed.

The Project Grant Program is designed to encourage projects which contribute to the community of life of Excelsior Springs.



$Section \ A-Organization \ Information$

| 1. | What is the name of the beneficiary organization? Click or tap here to enter text. |
|-----|--|
| 2. | Enter the organization's FEIN. Click or tap here to enter text. |
| 3. | Enter the organization's contact information. Contact Name: Address: Phone: Email: Website: |
| 4. | What is your role with relation to this request? |
| 5. | Please indicate how many consecutive years you have received grant funding for this project. $\Box 1 \text{ Year} \Box 2 \text{ Years} \Box 3 \text{ Years}$ |
| 6. | Are you the primary contact person for this request? $\square \text{Yes} \qquad \square \text{No}$ |
| 7. | Please provide a brief description of your organization's mission or purpose. |
| 8. | In what year was this organization founded or incorporated? |
| 9. | How many paid employees does your organization have? |
| 10. | How many volunteers are currently active in your organization? |



$Section \ B-Project/Initiative \ Information$

| 1. | Provide a name for your project or initiative. |
|-----|--|
| 2. | Where will your initiative have an impact? |
| 3. | Provide a brief description of your initiative or project. |
| 4. | Please indicate which of the following areas best relate to your project. □ Growth & Land Use □ Downtown Development □ Economic Development □ Tourism □ Recreation & Community Wellness □ Human Services □ Housing & Neighborhood Revitalization |
| 5. | What is the project's primary purpose and objective? How does your project meet the City's Vision and Strategic Priorities? |
| 6. | What makes your project or initiative unique and innovative? What gaps in the community's life will be addressed? |
| 7. | Please provide a description of how your project will contribute to the quality of life in Excelsior Springs. (Who will benefit, target audience, how will you reach them and how will they benefit?) |
| 8. | What is the total number of volunteers involved in your project? |
| 9. | What other groups/organizations are working jointly to make your initiative successful? |
| 10. | What measurable indicator(s) will determine that you have been successful in achieving the above-described outcome? |



Section C – Grant Request

- 1. Please enter the total cash amount you are requesting (\$):
- 2. Please enter the City Services amount you are requesting (\$):
- 3. Please attach a project budget (incomplete applications will be discarded and not receive consideration for funding), indicating the total cost of projected expenses along with the corresponding allocation of cash and in-kind donations of goods/services. Please also include a projection or project revenues, indicating the total amount of revenue with corresponding sources.

Please note the following expenses are INELIGIBLE. If you are unclear about the eligibility of an expense, please consult with City Staff:

Music or Performance Rights Cash Prizes

Staffing (wages) Travel

City Facility Rentals Grants to Other Organizations
Ongoing Operating Expenses Alcohol or Tobacco Purchases

4. Calculate the demonstrated financial need:

Total Cash Amount \$
Less: Total Cash Revenues \$
Demonstrated Financial Need \$



| Supporting Documentation Checklist □ Completed & Signed Application |
|---|
| ☐ Financial Statement from previous fiscal year or financial statement/accounting of last year's project |
| Project Grant funds dispersed by the City of Excelsior Springs will be dispersed upon completion of the Post Project/Event Form within 30 days of the completed project or initiative. The City of Excelsior Springs is willing to disperse a total of 25% of the allocated funds if needed in advance of the event for the event to occur. If the allocated funds are not used or if the Post Project/Event Form is not properly completed and submitted within 30 days of the event, the grant will be withheld. If you are facing challenges carrying out your project, please contact City Staff. |
| |
| Declaration |
| This declaration is to be signed by two signing officers of your organization. |
| We certify to the best of our knowledge that the information provided in this application is accurate, complete and endorsed by the group we represent. |
| We agree to acknowledge the financial support of the City of Excelsior Springs and understand that there is no commitment on the party of the City of Excelsior Springs to provide ongoing funding for the funded project. |
| We agree to complete the Post Project/Event Form. |
| We agree to submit proof of payment of all expenses to substantiate this grant request upon completion of the project (e.g. receipts, cancelled checks, and invoices which indicate verification of payments). |
| We agree that the project must be completed within the funding year approved. |
| We understand that the information about an applicant's operations is collected for the purpose of adjudicating the application and for administrative purposes. |

Organization Chair Signature

Project Director Signature