**2018**



The **Power of the Purse** Fund is soliciting grant requests at this time. Your request must be received in the Legacy Regional Community Foundation office located at 1216 Main Street, Winfield (KS) by **Thursday, September 20, 2018 at 5:00 p.m.** to qualify. As updates have been made to the form, only requests using the 2018 Grant Application form will be considered.

Power of the Purse (POP) is a women’s giving circle that pools donations to make grants to worthy projects. Qualified nonprofit organizations and service clubs are invited to apply. Grants to be considered will be one-time projects or special initiatives. Operating funds or overhead requests will not be considered. ***The 2018 POP goal is to fund projects that are innovative and have an immediate impact on the women and children in the Cowley County area.***

Power of the Purse aims to make a difference in the lives of women and children in the community by:

* Encouraging community within the circle and with those they serve
* Educating and increasing awareness of local need
* Building a network to catalyze positive change

Applicant organizations include 501c3 organizations, quasi-governmental entities, and service clubs willing to team up with a qualified organization. Organizations that promote a particular religious or political ideology will not be considered.

Questions? Please call Legacy Regional Community Foundation at

620-221-7224 or (toll-free) 855-470-7224

**2018**

**GRANT APPLICATION**

(This form may be recreated on a computer as long as questions are included in the same order. Please answer all questions and include all required information. As updates have been made to the form, only requests using the 2018 Grant Application form will be considered. Feel free to call Legacy Foundation with any questions.)

Legal name of applicant organization\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Primary contact person and title\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone/fax/email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What is the organization’s primary service mission and client group?

Name of the project or program you are seeking funding for:

Amount requested:

Specify a beginning and ending date for this project or program\_\_\_\_\_\_/\_\_\_\_\_\_OR

Include your timeline with benchmarks.

Will there be ongoing activity as a result of this project?

How specifically will women & children be impacted by this project?

In 6 months?

In 12 Months?

Is this a new (pilot) project?

If this is not a new project, what changes have you made to improve the project?

How do you collaborate with others in our community to eliminate duplication of services?

Do you hope to repeat this project in the future?

Will grant funds be needed to continue this project?

If continuing funds will be needed, what plans are there for sustainability?

Is there a plan for matching funds for this project?

**Please limit your narrative to a total of 2 typed pages for these four questions.**

1. Clearly describe the project or program in100 words or less. (This description will appear on the ballot for members to vote in awarding the grants.)
2. Briefly describe who will benefit and how.

3. How will outcomes/results be measured for this project?

1. Budget Narrative

* How much will the project cost?
* How will the money be spent?
* What is requested from Power of the Purse?

Thank you for your interest in our community! Grant recipients can expect to hear from the foundation within ~~six (6)~~ eight (8) weeks of the final submission date.

Those applicants awarded a grant will be sent a letter that describes the amount of the grant award, payment procedures and terms of the grant. An authorized representative of the organization should sign the letter, indicating acceptance of the grant and its terms, and return it to the Legacy Foundation.

CHECK LIST OF INFORMATION REQUIRED FOR SUBMISSION

* Completed application
* List of officers and board members or governing body, including name, address and telephone
* Copy of IRS letter stating nonprofit status **or** if the organization is charitable in mission but not incorporated as a 501 (c) 3, please explain in a cover letter

**Grant recipients must use all funds as intended within 12 months of disbursement. Unused or inappropriately used funds must be returned to POP. Grant recipients will be required to submit a grant report detailing how the funds were used and the impact of the grant. (See attached sample)**

The following two people certify that they are authorized to sign this grant application on behalf of the applicant organization and further certify that the application is accurate and complete to the best of their knowledge.

Contact Person \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Title\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

Fund Administrator\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Title\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

Date\_\_\_\_\_\_\_\_\_\_\_\_\_

**GRANT SUBMISSION DEADLINE: Thursday, September 20, 2018 at 5:00 p.m.**

*Please send completed grant applications to:*

## Power of the Purse

**@Legacy, a Regional Community Foundation**

**P.O. Box 713**

**Winfield, KS 67156**



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| --- | --- | --- | --- | --- |
| **LEGACY, POWER OF THE PURSE - GRANT REPORT** | | | | |
| ORGANIZATION: | |  |  |  |
| GRANT AMOUNT: | |  |  |  |
|  |  |  |  |  |
| **GRANT DESCRIPTION:** | |  |  |  |
|  |  |  |  |  |
| **# OF INDIVIDUALS IMPACTED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | |  |
|  |  |  |  |  |
| **PROVIDE A SYNOPSIS OF THE IMPACT this grant funding made in our community (100 words or less)** | | | | |
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|  |  |  |  | **DESCRIPTION** |
| **DATE** | **CHECK #** | **PAYEE** | **amount $** | **(please attach copies of all receipts)** |
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|  |  | TOTAL |  |  |
|  |  | GRANT AMOUNT |  |  |
|  |  | NET EXCESS/DEFICIT |  |  |
|  |  |  |  |  |
| IF ALL FUNDS WERE NOT USED, PLEASE PROVIDE DETAILS\*, including why funds were not used, where | | | | |
| funds are now & any request for use of funds in lieu of returning funds to POP: | | | | |
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|  |  |  |  |  |
| \*This report must be filed at Legacy Foundation **by Friday, September 27, 2019 at 5:00 p.m**. for a 2019 | | | | |
| grant application to be considered. A revised report may be filed by 12/1/2019 for currently unspent funds. | | | | |