

**2021 GREATER HARRISBURG COMMUNITY FOUNDATION**

**BENJAMIN FRANKLIN TRUST FUND**

**GRANT APPLICATION**

**DATE DUE: AUGUST 1, 2021**

Thank you for applying to the Benjamin Franklin Trust Fund of the Greater Harrisburg Community Foundation, a regional foundation of The Foundation for Enhancing Communities. Tell your story clearly and concisely. Attachments are required; follow all directions. Failure to answer questions, utilize this template, or provide required materials will disqualify your application. **Answer all questions using information that applies to the project seeking support of grant funds.** Contact Andrea Iguina, Program Officer for Community Investment, at 717-236-5040 or [aiguina@tfec.org](mailto:aiguina@tfec.org) with any questions.

**APPLICANT SNAPSHOT**

**Applicant Organization Name**

Click or tap here to enter text.

*Provide your organization’s name as currently recognized by the IRS*

**Check box if the Applicant Organization Name above is a “Doing Business As” name and the provided 501c3 letter states a different name*.*** *To be recognized by the “Doing Business As” name, attach ONE legal document using the provided name. If not provided, TFEC will utilize the 501c3 name.*

**Check box if the Applicant Organization uses a Fiscal Sponsor and provide name here**

Click or tap here to enter text.

**Name, Title, Email, Phone of Executive Leader**

Click or tap here to enter text.

*All contracts and notifications of grant status will be addressed to the individual provided here*

**Applicant Organization’s Physical Address**

Click or tap here to enter text.

**Applicant Organization’s Address for Mailed Communications**

Click or tap here to enter text.

*All contracts and notifications of grant status will be sent to the address provided here*

**Name, Title, Email, Phone of Contact Completing Application**

Click or tap here to enter text.

*If application questions arise, this individual will be contacted by TFEC staff*

**Counties to be served as part of project; check all that apply.**

Cumberland  Dauphin  Franklin  Juniata Mifflin Lebanon  Perry

Northern York (Dillsburg Area)

**PROJECT NARRATIVE**

*Answer questions 1-5 clearly and concisely; no limit (except for Project Snapshot)*

**PROJECT TITLE** Click or tap here to enter text.

*Project Title must match title listed throughout application and online*

**APPLICANT ORGANIZATION MISSION STATEMENT**

Click or tap here to enter text.

**PROJECT SNAPSHOT**

**1.** Capture your project and the community need it seeks to address in 200 words or less.

Click or tap here to enter text.

**PROJECT NARRATIVE**

**2.**  Describe the proposed project, the geographic area it will serve, and the audience to be served; state why this audience was selected. You MUST use and complete the following statement within your answer, “Grant funds will be used to \_\_\_\_\_\_\_\_\_\_\_\_\_”. Include when and where the project will take place. List dates and locations as appropriate in chronological order and state if provided dates/locations are confirmed, estimated, or to be determined.

Click or tap here to enter text.

**FUNDING**

**3.** Restate the amount you are seeking from TFEC and describe any other funding sources and amounts. If this proposal is not funded at the level requested, will you be able to implement the project as stated? Explain as needed.

Click or tap here to enter text.

**PROJECT SUCCESS**

**4.**  What will project success look like and how will project success be measured and documented (i.e.: how will you know the project is successful? Are you collecting value statements, numbers served, surveys, photos, before and after images, or using other methods)?

Click or tap here to enter text.

**ACCESS & INCLUSION**

**5.** As a community foundation, TFEC fosters a climate of purposeful inclusion that values diversity of gender, age, race, ethnicity, national origin, range of abilities, sexual orientation, and socio-economic status. Please state how your project will be made accessible to all individuals who qualify for participation in the project and describe any accommodations, modifications, technologies, or services you will offer to ensure that all eligible participants experience the best possible services or outcomes.

Click or tap here to enter text.

**BUDGET WORKSHEET**

*Complete the Budget Worksheet below; a Project Total is required.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **ITEM OR SERVICE**  *Examples include: Contracted Services, Equipment, Personnel, Supplies; list your own as appropriate.* | **DESCRIPTION OF ITEM OR SERVICE** | **REQUESTED GRANT FUNDS**  *List where funds sought through this grant opportunity will be applied.* | **OTHER FUNDING SOURCES**  *List the names and amounts of all other funding sources.* | **PENDING, COMMITTED, OR**  **RECEIVED**  *Using a P, C, or R, indicate the status of all funding sources*. | **$ TOTALS**  *Add across to provide a total for each row. Total columns as indicated in bottom row.* |
|  |  | $ |  |  | **$** |
|  |  | $ |  |  | **$** |
|  |  | $ |  |  | **$** |
|  |  | $ |  |  | **$** |
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|  |  | $ |  |  | **$** |
|  |  | $ |  |  | **$** |
|  |  | $ |  |  | **$** |
| **TOTALS** | | **$**  **Total: Requested Grant Funds** | **$**  **Total: Other Funding Sources** |  | **$**  **PROJECT TOTAL** |

**2021 BENJAMIN FRANKLIN TRUST FUND SIGN & SUBMIT FORM**

**Provide signatures from the applicant organization, below. Both organization representatives must sign.**

*By providing your original OR digital signature below, you agree that the provided information in this application is true to the best of your knowledge and may be submitted for review. Completion of this form is one component of your Complete Application.*

**President/CEO** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Click or tap here to enter text.

Ink Signature Digital Signature

**Board President** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Click or tap here to enter text.

Ink Signature Digital Signature

**REQUIRED ATTACHMENTS TO BE UPLOADED & SUBMITTED BY 4PM IN THE DEADLINE DATE**

*All grant materials must be submitted through the TFEC online application system by 4pm on the deadline date. This grant opportunity does not utilize delivered or mailed materials.*

**Complete Application:** Applicant Snapshot, Project Narrative, Budget Worksheet, and Sign & Submit Form with original or digital signatures.

**Board of Directors List:** Professional affiliations (ie: work positions and/or titles as applicable) must be included.

**Letters of support are OPTIONAL for this grant opportunity but must be uploaded by the deadline date. No more than TWO letters of support with original or digital signatures may be provided.** Letters of support from the applicant organization’s Board of Directors will not be accepted; identical form letters are discouraged.

**Applicants who utilize a FISCAL SPONSOR** must include a letter signed by the Executive Leader of the Fiscal Sponsor organization indicating agreement to serve as the Fiscal Sponsor. An original or digital signature is required.

**IRS 501(c)(3) determination letter**

**1st Page of Applicant Organization’s Most Recent 990.** If 990 is not available, or your organization files a 990-N (e-Postcard), upload applicant organization’s most recent audit or financial statement.

**QUESTIONS**

If you should have any questions regarding this form or TFEC grant opportunities, contact Andrea Iguina, Program Officer for Community Investment, at [aiguina@tfec.org](mailto:aiguina@tfec.org) or 717-236-5040.