



## **NORTHEASTERN POTTER ECONOMIC SUPPORT FUND**

*Grant Guidelines and Application*

The Northeastern Potter Economic Development Association partnered with the Community Foundation for the Twin Tiers (CFTT) to provide an economic development grant program that will provide support to non-profit organizations including 501(c)(3) agencies or charitable programs in the north eastern area of Potter County. This includes the areas of townships and borough served by the Northern Potter School District: Ulysses Township, Ulysses Borough, Harrison Township, Genesee Township, Allegany Township, Bingham Township, and Hector Township.

Goals of the Program: To provide economic support to the community that enhances the quality of life. This is a competitive grant, so some of the key areas the selection committee is looking to be addressed are the following:

1. Job Creation & Retention
2. Strategic Planning Initiatives
3. Community Promotion / Awareness

Who can apply:

\* A 501(c) (3) organization, a unit of government, the school district, or a project - program that has a charitable purpose.

Funding Documentation Required:

1. Application including Budget Breakdown for this project

Funding Documentation Suggested (if applicable):

1. Most recent IRS letter showing 501(c)(3) exempt status
2. Current annual operating budget
3. List of Board of Directors / Governing Body
4. A letter of support from any collaborating organization

This application will be reviewed and approved by the CFTT Board of Directors. Deadline is Thursday, September 14, 2023 at 5:00 pm.

Applicants who have not submitted an evaluation form for previous Northeastern Potter Economic Support Fund grants by the grant deadline will not be considered for funding during this grant cycle.

Please email application to [cfield@twintierscf.org](mailto:cfield@twintierscf.org). Direct questions to Charity Field at [cfield@twintierscf.org](mailto:cfield@twintierscf.org).



**NORTHEASTERN POTTER ECONOMIC SUPPORT FUND GRANT APPLICATION**

Date: \_\_\_\_\_

Organization Name: \_\_\_\_\_ Point of Contact: \_\_\_\_\_

Organization Address: \_\_\_\_\_ Tax ID#: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Service Area (s): \_\_\_\_\_

Amount of Grant Request: \_\_\_\_\_

Organization Mission (select one):

- Arts & Culture      Civic      Education      Health & Human Services      Recreation & Youth

Mission Statement:

Program/Project Title: \_\_\_\_\_

Purpose: \_\_\_\_\_

What is the community need you're addressing?



List any collaborating agencies that will also be involved in this program/project?

How did you determine the need?

What are the measurable goals of the program/project?

How many individuals do you expect the program/project to reach?

What is the long-term outcome for the community at-large?



Is the program/project sustainable going forward and if so, how?

Any additional information that you feel is important to share?

**Budget:** Complete the following budget table. Include categories of expenditures, including how much funding will come from the requested grant and how much funding will come from other sources.

<b>Expenditure Category</b>	<b>(A) CFTT/ NEPEDA Request</b>	<b>(B) Funds From Other Sources</b>	<b>Total Cost (A+B):</b>
Salaries			
Equipment			
Rent/Mortgage			
Utilities			
Transportation			
Other (please list)			
<b>Total</b>			

Please ensure that "Other Funding" includes revenue from: • Grants/Contracts including local, state or federal government, Foundations (please itemize), corporations, and individuals. • Earned Income from events, publications, and projects. • Membership Income • In-Kind Support • Other (Please Specify)



*Application Submitted By (Name and Title):* \_\_\_\_\_

*Date:* \_\_\_\_\_

Applicant Contact Information:

E-mail: \_\_\_\_\_

Phone: \_\_\_\_\_

If you are selected for a grant award a report will be due to CFTT one year from the grant award date highlighting outcomes/successes.

If you have any questions about this application, please contact: Charity Field at 570.888.4759 or email: [cfield@twintierscf.org](mailto:cfield@twintierscf.org).

Electronic submission of the application is required. If other arrangements are needed, please contact: [cfield@twintierscf.org](mailto:cfield@twintierscf.org).