



*Application Form*  
Neighborhood Small Grants Program  
(NSGP)

Application Deadline: 4:30 p.m. Monday, March 14, 2016

**A. Organization Profile**

Organization \_\_\_\_\_

Contact Person for This Application \_\_\_\_\_

Mailing Address \_\_\_\_\_ Zip \_\_\_\_\_

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

Neighborhood Boundaries

North \_\_\_\_\_

South \_\_\_\_\_

East \_\_\_\_\_

West \_\_\_\_\_

Approximately how often did your group meet in 2015?

8-12 times \_\_\_ 3-7 times \_\_\_ 2 times \_\_\_ 1 time \_\_\_ no meeting \_\_\_

On average, how many members/neighbors attend each meeting? \_\_\_\_\_

Do you have by-laws or operating rules? YES \_\_\_ NO \_\_\_

How often do you elect new leaders? \_\_\_\_\_

Does your organization having a checking account? YES \_\_\_ NO \_\_\_

*Please Note: You must establish a checking account to receive funding.*

Name of Your Treasurer \_\_\_\_\_

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

**Describe your neighborhood and its residents.**

**Tell us about your neighborhood organization.**

**B. Grant Request**

Project Name :Branding and Beautification of Entrances to the Island Home Park Neighborhood

Project Coordinator: Wayne and Carolyn Williams

Phone 865-573-6534 Email: cmuwms@comcast.net

Amount Requested \$ \$3,000.00 (\$500 minimum to \$3,000 maximum)

**Please Note:** Dollars you receive from the Neighborhood Small Grants Program must be matched on a dollar-for-dollar basis with other contributions. See Page 8.

Project Starting Date June 1, 2016 (approximate

Project Ending Date June 29, 2017 (no date) *later than June 30, 2017)*

Nancy Campbell (President) and Carolyn Williams (VicePresident) represented our group at the Pre-Application Workshop.

**Fiscal Sponsorship**

Our group has contacted the Office of Neighborhoods regarding whether we will use a fiscal sponsor for this grant, if we are funded.

YES  NO

Please check the choice that applies to your organization:

Our group has a valid 501(c)(3) determination letter from the IRS and will receive funds directly rather than use a fiscal sponsor.

We will use East Tennessee Community Design Center as our fiscal sponsor.

We will use the following 501(c)(3) organization as our fiscal sponsor:

Name \_\_\_\_\_

Address \_\_\_\_\_

Contact Name \_\_\_\_\_

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

### **C. Your Project**

**Describe the project or activities for which you are requesting funding and support.**

Address such questions as: How was the project selected? Who will carry it out? What do you hope to achieve or accomplish by doing this project? How will it improve the neighborhood? (Please attach a sketch of the proposed design of physical projects, such as parks, signs, and major landscaping projects.)

**How will your project connect and engage residents in your neighborhood?**

**D. Measure the Results**

**What are your project goals? How will you measure your success?**

Measurable goals could be things like frequency of a particular activity (potluck supper), number of residents participating in a social event, number of residents reached in a door-to-door survey, and percentage of those residents who get involved in the organization in some way.

You can also measure success with more subjective evidence, such as testimonials, first-hand accounts, and narratives of the impact of your project.

**E. Project Work Plan and Timeline**

Please complete the following Project Work Plan and Timeline. List separately each key step or task that will be necessary to carry out your project; name the person(s) in charge of carrying out each task; and indicate with a check mark in which quarter the task is to be completed.

**Project Work Plan & Timeline**

<b>Project Tasks</b>	<b>Person(s) Responsible</b>	<b>July- Sept 2016</b>	<b>Oct-Dec 2016</b>	<b>Jan-Mar 2017</b>	<b>April- June 2017</b>

**F. Proposed Project Budget**

Estimated Cash Income

*This includes the amount of your request from NSGP, your group's cash contribution, cash contributions from others, and project income.*

<b>Source</b>	<b>Amount</b>
Neighborhood Small Grants Request	\$
	\$
	\$
	\$
	\$
<b>Total Estimated Cash Income</b>	<b>\$</b>

\*\*\*\*\* Total Cash Income **must equal** Total Cash Expenses. \*\*\*\*\*

Estimated Cash Expenses

<b>Item</b>	<b>Amount</b>
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
<b>Total Estimated Cash Expenses</b>	<b>\$</b>

**G. Matching Contributions**

The money you receive from the Neighborhood Small Grants Program must be matched on a dollar-for-dollar basis with the total value of volunteer labor, donated goods and services, and any non-NSGP, non-City-of-Knoxville cash income dedicated to the funded project. **The total of your matching contributions must equal or exceed the amount requested from NSGP.**

One third of the match must be in the form of volunteer labor provided by residents.

Funds from other City of Knoxville sources, such as City Council 202 funds, can be used in an NSGP-funded project, but they cannot be used for the match.

For volunteer labor, calculate the value based on \$15/hour. Labor donated for specific professional services can be charged at that professional’s rate, which should be specified in a letter to you.

Neighborhood Small Grants Request	\$
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**Matching Contributions**

Type and Source	Value
Volunteer Labor	
	\$
	\$
	\$
	\$
Cash Income (other than NSGP or City of Knoxville)	
	\$
	\$
	\$
Donated Goods & Services (list separately)	
	\$
	\$
	\$
	\$
	\$

Total Estimated Matching Contributions	\$
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## **H. Budget Narrative**

**Some line items in your project budget and matching contributions may need an explanation. Use this space to elaborate.**

**How will the project or improvements be maintained after the grant ends? Have you been able to identify other possible sources of funding?**

**If you receive some funds, but not the total amount you requested, how would you modify your project?**

