KREMC Operation Round Up: February 2024 Cycle

Kosciusko County Community Foundation

Application Instructions

The Kosciusko County Community Foundation and Kosciusko REMC accept grant applications for the KREMC Operation Round Up Fund from charitable organizations who serve residents living within the Kosciusko REMC service areas. Grant awards are announced approximately six weeks following each deadline. If you have any questions throughout the application process, please contact alex@kcfoundation.org or 574-267-1901.

- **Please speak with a member of our program staff prior to submitting your application.**

Please complete all required questions below. Completed applications and required attachments must be submitted by **4:30 p.m. on the deadline date** in order to be considered for funding by the committee.

Pre-Grant Inquiry*
Please discuss your proposal with a member of our program staff prior to submitting your application. Please contact Alex Hall at alex@kcfoundation.org or 574-267-1901.

On what date did you communicate with our staff regarding your grant request?
Character Limit: 10

Before you begin, please take a moment to verify the contact information on your user profile. If you need to make changes, you will be given the opportunity to do so in the Contact Information sections below.

Applicant Contact Information*
Is your contact information at the top of this page correct?

Choices
Yes
No

Organization Contact Information*
Is your organization's information at the top of this page correct?

Choices
Yes
No

Grant Correspondence Mailing Address*

Is the organization's address shown above the preferred mailing address for grant correspondence?

Choices
Yes
No

Applicant Contact Information

Please complete the fields that need to be updated. Community Foundation staff will update your profile after the grant application deadline.

Applicant Prefix

(Mr., Mrs., Ms., etc.)

Character Limit: 15

Applicant First Name

Character Limit: 25

Applicant Last Name

Character Limit: 25

Applicant Business Title

Character Limit: 50

Applicant E-mail

Character Limit: 254

Applicant Phone Number

Please format as 574-267-1901 x100.

Character Limit: 20

Applicant Phone Type

Choices
Office
Cell
Home

Organization Contact Information

Please complete the fields that need to be updated. Community Foundation staff will update the organization's profile after the grant application deadline.

Organization Name
Character Limit: 150

Organization Phone Number
Please format at 574-267-1901.

Character Limit: 12

Organization Mailing Address
Character Limit: 100

City
Character Limit: 75

State
Character Limit: 75

Zip Code
Character Limit: 5

Director Prefix
(Mr., Mrs., Ms., etc.)

Character Limit: 15

Director First Name
Character Limit: 50

Director Last Name
Character Limit: 50

Director Business Title
Character Limit: 75

Director E-mail
Character Limit: 254

Director Phone Number
If different from the organization's phone number provided above.

Character Limit: 20

Director Phone Type

Choices
Office
Cell
Home

Grant Correspondence

Grant correspondence will be mailed to the address below:

Preferred Mailing Address for Grant

Character Limit: 100

City

Character Limit: 75

State

Character Limit: 75

Zip Code

Character Limit: 5

Organization Information

In this section, you will be asked to provide <u>general</u> information about your organization.

Organization Type*

Please select your organization type.

Choices
501(c)3 Charitable Organizations
Church
Governmental Organization
Private School
Public School

Organization Overview*

Please provide a brief overview of the organization. Include principal services, purpose and mission.

Character Limit: 2000

What population(s) does your organization serve?*

Character Limit: 500

Grant Proposal

Grant Number
Character Limit: 8

*In this section, you will need to provide more **specific** information about the project for which you are seeking grant funding.*

Project Summary:

Project Name*
Character Limit: 250

Amount Requested from KREMC Operation Round Up*
Character Limit: 20

Description*
Provide a **brief** summary of the project/program for which you are requesting funds.
Character Limit: 200

Program Area*
Select the program area to which you think your project can be best categorized.

Choices
Arts & Culture
Civic
Education
Environment
Health
Human Services
Recreation

Describe your project in more detail:

What is the need?*
Explain or describe the need for this project. And, what sources can you cite to verify this need using statistics, regulations, surveys, etc?
Character Limit: 3000

How will you meet the need?*
Describe how this project addresses the identified need. *This is an opportunity for you to explain in more detail how your project will work.*

Character Limit: 3000

Who will implement the project?*

Explain the organization's ability to carry out this project. Who specifically will implement the project and what are their qualifications?

Character Limit: 3000

Collaborations & Partnerships*

Describe any collaborations, partnerships, and/or joint ventures as it relates to this project. Explain what role they will have (funder, collaborator, service provider, etc.).

Character Limit: 2000

Project Timeline

Please tell us the start and end date of your project. It is important to note that grant awards are announced approximately six weeks after the deadline. Requests for expenses that are incurred prior to grant approval will receive low priority and are unlikely to receive funding.

Start Date*

Character Limit: 10

End Date*

Character Limit: 10

Timeline Comments

If you need to provide additional information regarding your project timeline, please use this space.

Character Limit: 1000

Explain the expected benefits of this project:

Impact Assessment*

How will you measure and assess the benefit and/or impact of your project?

Character Limit: 3000

Total Served*

Approximately how many people will be served, benefited or impacted by this project?

Character Limit: 6

Kosciusko County Residents Served

Of those being served, how many are **Kosciusko County residents**?

Character Limit: 5

Population Served by Project*

Please select the primary population that your program/project will serve.

Choices

General Public
Infant/Babies
Children/Youth
Adults
Elderly
Disabled
Minorities
Females
Males
Low Income
Other

Other Population

If you selected "other" from the drop down list, please specify.

Character Limit: 100

Age Range*

What is the approximate age range of those being served?

Character Limit: 7

Region*

Please select the primary region being served by this project.

Choices

Multi County
County Wide
Akron
Atwood
Burket
Claypool
Etna Green
Leesburg
Mentone
Milford
North Webster
Pierceton
Silver Lake
Syracuse
Tippecanoe Valley
Warsaw
Wawasee
Winona Lake
Other

Other Region

If you selected "other" from the drop down list, please specify.

Character Limit: 100

Feedback/Evaluation*

How do you receive feedback from those that you serve or that would be benefitted by a grant award?

Character Limit: 1000

Final Report Requirement*

A final report is required to be submitted to the Community Foundation within one year of the grant award. Will you fulfill this reporting requirement?

Choices

Yes

No

Budget Information

Itemized Expenses

Please use this table to list your expenses related to this proposal.

	Expense Description (Combine like items on one row if more room is needed.)	Amount	Percent of Total Budgeted Expenses	Will you use Operation Round Up grant money to fund this item?
1				
2				
3				
4				
5				

6				
7				
8				
9				
10				

Total Expenses*

This amount should equal the sum of the Itemized Expenses reported above.
It should also equal the Total Financial Support reported below.

Character Limit: 20

Sources of Financial Support

Please use this table to list the entities and organizations providing financial support related to this proposal.

Type of Funding	Description of Source of Income	Amount	Percent of Total Revenue	Is this funding Pending or Secured?
AMOUNT REQUESTED FROM OPERATION ROUND UP				
Federal/City/State Governments				
Other Foundations (1)				

Other Foundations (2)				
Public Contributions/Donations (Specify) (1)				
Public Contributions/Donations (Specify) (2)				
Loans				
Your Organization's Contribution				
Other (1)				
Other (2)				

Total Financial Support*

This amount should equal the sum of the Sources of Financial Support.
This amount should also equal the Total Expenses reported above.

Character Limit: 20

Partial Funding or Denial*

If this project receives partial funding or is denied, how will you proceed?

Character Limit: 1000

Certification

Certification

The information contained in this application is for the purpose of obtaining funding from the Kosciusko REMC Operation Round Up Fund on behalf of the undersigned. The undersigned

understands that the information provided is true and complete and that the Kosciusko REMC Operation Round Up Fund may consider this statement as continuing to be true and correct until a written notice of a change is provided. The Kosciusko REMC Operation Round Up Fund is authorized to make all inquiries they deem necessary to verify the accuracy of the statements made herein. It is understood that all the information herein will be kept in the strictest of confidence by the Kosciusko REMC Operation Round Up Fund Advisory Committee.

Electronic Signature*

Enter your name to confirm your electronic signature.

Character Limit: 250

Publicity Agreement*

For publicity purposes, my identity may be revealed.

Choices
Yes
No

Authorization Signature

Two signatures are required in addition to the applicant's electronic signature. The signatures indicates that the person has reviewed the grant request and agrees to its submission.

To complete this section, download the **Grant Authorization Signature Form** and complete the top section of the form using responses from this application, collect the appropriate signatures, and upload the completed form below.

Please note that the person providing their authorization will depend on the type of organization, as indicated on the form.

Grant Authorization Signature Form (Fillable PDF)

Authorization Signature Form Upload*

Please upload your completed Authorization Signature Form.

File Size Limit: 2 MB

501(c)(3) and Private School Attachments

Charitable organizations and private schools must upload the following documents:
(accepted formats include: PDF and Word)

- IRS Determination Letter
- Board of Directors list with names and town/city of residence
- Staff list with names and town/city of residence
- Financial Documents

Government & Church Attachments

Churches and Governmental Organzations must upload the following documents:
(accepted formats include: PDF and Word)

- Board of Directors list with names and town/city of residence
- Staff list with names and town/city of residence
- Financial Documents

Public School Attachments

Schools must upload the following documents:
(accepted formats include: PDF and Word)

- School Board list with names and town/city of residence
- Staff list with names and town/city of residence

School Name*
Please select your school from the drop down list below.
If your project will impact students at multiple schools within the same school corporation, please select the school corporation.

Choices
Akron Elementary School
Claypool Elementary School
Edgewood Middle School
Eisenhower Elementary School
Gateway Education Center
Harrison Elementary School

Jefferson Elementary School
Lakeland Early Learning Academy
Lakeview Middle School
Leesburg Elementary School
Lincoln Elementary School
Little Cats Early Learning Center
Madison Elementary School
Mentone Elementary School
Mentone Kindergarten Readiness Center
Milford Elementary School
North Webster Elementary
Pierceton Elementary
Syracuse Elementary
Tippecanoe Valley High School
Tippecanoe Valley Middle School
Tippecanoe Valley School Corporation
Warsaw Area Career Center
Warsaw Community High School
Warsaw Community Schools
Warsaw Early Learning Academy
Washington STEM Academy
Wawasee Community School Corporation
Wawasee Early Learning Center
Wawasee High School
Wawasee Middle School
Whitko Career Academy
Whitko High School
Other

Other School Name
If you selected "other" from the drop down list, please enter your school name below.

Character Limit: 100

IRS Determination Letter

IRS Determination Letter*
File Size Limit: 2 MB

Board List

Board of Directors List*
This may be your Board of Directors, School Board, City/Town Council, etc. Please show which individuals are officers and what their positions are (President, Vice President, Treasurer, Secretary, etc.).

File Size Limit: 2 MB

Staff List

Staff Member List*

If your organization has a large number of employees, please only include those who will be working on this particular project. If your organization does not have any paid staff, please upload your board list again.

File Size Limit: 2 MB

Financial Documents

Internal Financial Documents*

Please upload a copy of your organization's most recent Statement of Activities and Statement of Financial Position.

File Size Limit: 6 MB

Form 990

Please upload a copy of your organization's most recent 990. If your organization does not file a 990 or 990-EZ, please skip this question.

File Size Limit: 6 MB

Not sure which financial documents to include? Examples of a Statement of Activities and a Statement of Financial Position can be found on our website at https://www.kcfoundation.org/grants/kremc-operation-round-up/.

Additional and Supporting Documentation

Additional Supporting Documentation

Please upload supporting documentation that you have. Examples of such documents might be quotations, photos, letters of support, executive summaries, etc. related specifically to this project.

File Size Limit: 5 MB