

BEAVER COUNTY FOUNDATION  
P. O. Box 569, Beaver, PA 15009  
*Grant Proposal*  
Submission Check List

Application Instructions: Complete this Grant Proposal Submission Checklist, the Application Cover Form, answer questions on Application Page 2 on separate sheets of paper (use no more than 6 pages), complete the Project/Program Budget Form, and add attachments as requests on the submission checklist. Compile the completed items in the order noted on the submission checklist, and submit an original and two copies. **This sheet is to accompany every grant application. Please submit your grant proposal in the following order. Check all that apply.**

Name of Organization \_\_\_\_\_

1. Grant Proposal Checklist
2. The Beaver County Foundation Application Cover Form
3. Proposal Narrative (contains organizational history and project justification; nor more than 2-6 pages).
4. Project Budget Form
5. Most recent annual audit or other approved annual financial statement for your organization.
6. One copy of your organization's IRS 501 (c) (3) non-profit determination letter.
7. Current list of governing board including names occupations; please note officers.
8. If applicable, letters from financial or programmatic partners in the proposed project/program (no other letters of support are necessary).
9. Most recent annual report or publication describing your organization.
10. One original and two copies of the entire grant proposal (Do not bind or staple-use paper clips or binder clips).

Completed by: \_\_\_\_\_ Date: \_\_\_\_\_

BEAVER COUNTY FOUNDATION  
GRANT MAKING PROGRAM  
APPLICATION COVER FORM  
Please computer generate, type or print neatly

**ORGANIZATION INFORMATION**

Legal name of applicant organization: \_\_\_\_\_  
Address : \_\_\_\_\_  
Executive Director, President or CEO name and title: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Contact E-mail: \_\_\_\_\_  
Contact Name: (If different from Director/CEO): \_\_\_\_\_ Website: \_\_\_\_\_  
Contact title and Phone: \_\_\_\_\_  
Year organization founded: \_\_\_\_\_  
Organization's total operating budget: \$ \_\_\_\_\_ Amount of this request: \$ \_\_\_\_\_

**GRANT REQUEST INFORMATION**

Fiscal Agent (if you do not have your own 501 (c)(3) status: \_\_\_\_\_  
Name of Project: \_\_\_\_\_  
Project/Program Abstract (Brief summary of project/program-if you're grant is awarded, this will be used for public relations).  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please check all communities in the Foundation's service area that are served by the proposal.  
Ambridge, Aliquippa, Beaver, Beaver Falls, Freedom, Midland, Monaca, New Brighton,  
Hopewell, Rochester, Other \_\_\_\_\_

TOTAL GRANT REQUEST	
Cost of proposed project/program	
Amount requested from the Beaver County Foundation	
Request as a % of the total project/program costs.	
<b>TOTAL</b>	

List previous grant funding sources:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## BEAVER COUNTY FOUNDATION

### Application Page 2

Answer the following questions in section A-D in a total of 2-6 typed or computer generated pages:

#### A. Project/Program Narrative

1. Describe the following aspects of the project/program:
  - a) History of the organization and/or Project/Program (include accomplishments and qualifications)
  - b) Problem/Needs Statement (why is this project necessary and who will it serve)
  - c) Project/Program Design (include process and who is involved)
  - d) Objectives (desired outcomes of the project/program)
  - e) Methods (activities that will be conducted in order of achieve/implement objectives)

#### B. Impact and Evaluation

1. How will you define success for your project/program? Why do you think the project/program will be successful?
2. If this is a recognized model or vendor produced project/program, have you seen it in practice elsewhere? How will you learn from their experiences?
3. Explain how your project/program contributes to the Foundation's community development mission by improving the community.
4. Describe how your project/program/program affects the quality of life, encourages economic development, and/or helps to serve an underserved population.
5. Who are your partners in this project/program and what roles do they play?
6. How does your project/program build social capital for Beaver County (i.e. bringing people together who normally don't work together, etc.)?

#### C. Sustainability Plan

1. List additional sources of support for this project/program in the chart below:

Other funding sources	Potential or Committed	Amount

2. What are your plans for long-term funding and/or maintenance of the proposed project/program?
3. If your grant is not approved, what alternative plan will you follow?

#### D. Endorsement

We have carefully read the information provided for the Beaver County Foundation Proposal Form. The governing board has approved the submission of this proposal. If we receive a grant, we agree to use the funds as granted or to return them if such use is not feasible. We will allow the Beaver County Foundation to use information provided in this grant for public information pieces and will mention the Foundation's support in any publicity generated regarding this project/program. Please sign below to verify that the governing board has approved the submission of this proposal.

\_\_\_\_\_  
Chair, President, Governing Board

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

\_\_\_\_\_  
Executive Director

Beaver County Foundation

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

[tladerer@gmail.com](mailto:tladerer@gmail.com)

PH: 724 728 1331

**BEAVER COUNTY FOUNDATION**  
**PROPOSED PROJECT/PROGRAM BUDGET FORM**

Prepare the following operating budget for the proposed project/program for your current fiscal year.

Note that organizational budget documents showing revenue and expenses are also required as noted on the grant submission checklist. They should be in the form of the most recent annual audit or other approved annual financial statement.

Project/Program budget for the period from \_\_\_\_\_ to \_\_\_\_\_.

PROPOSED PROJECT/PROGRAM ANNUAL BUDGET			
ITEM	Amount requested from BCF	Amount provided from other sources as match	Total Amount
<b><i>Project/Program Expenses</i></b>			
Supplies			
Printing & Copying			
Equipment			
Materials			
Communications (phone, fax, etc.)			
Public Relations			
Salaries & Wages			
Postage and Shipping			
Evaluation			
<i>Other Expenses-Please list</i>			
<b><i>Personnel Expenses</i></b>			
Salaries			
Benefits and payroll taxes			
Consultants & professional fees			
Rent			
Travel and training			
Administration			
<i>Other Expenses-Please list:</i>			
<b>TOTAL PROJECT PROGRAM BUDGET</b>			