



2024 Grant Application Form

Instructions:

- Download and save this form as a Microsoft Word file to your computer;
- Respond to each question;
- Save your document file, and
- Submit the form via email to aliceburch@aol.com no later than 5:00 pm sharp, ET, Monday, April 15, 2024.
- Late submissions will not be accepted.
- Questions may be directed to aliceburch@aol.com.

Organization Information:

- 1) Name of Organization:
- 2) Organization Description:
- 3) Mission Statement of the Organization:
- 4) Mailing Address:
- 5) Email Address:
- 6) Organization Website Address:
- 7) Does the Organization's Bylaws, (provided copy) Charter and/or Mission (or similar) include protections for individuals on the basis of each of the following identity markers: sex, gender identity, race, national origin, religion, sexual orientation, ability/disability status, marital status, and veteran status?
 - Yes or No:
 - If yes, include the specific language below:
- 8) Does the Organization hold 501(c)(3) or other non-profit status?
 - Yes or No:
 - If no, please provide status:
- 9) Provide the Organization's Federal Employer Identification Number (FEIN), if applicable:
- 10) List Board Member/Director Names:
- 11) Number of Paid Staff:
- 12) Organization's Annual Budget:
- 13) Name and email of Executive Director:
- 14) Name, email, and phone number of persons submitting the Application for this grant (i.e., Grant Writer / Contact Person):

Project/Program Information:

- 1) Grant Amount Requested:
- 2) Beyond possible grant funding through the MSCA, how will this Project/Program be funded? (If other funding sources—secured or pending—note other funding source(s) or organizations and amounts anticipated.):
- 3) Total Budget for this Program/Project:
- 4) Grant Project/Program Title:
- 5) Description of Grant Project/Program:
- 6) New or Reoccurring Project/Program:
- 7) Program/Project Duration (i.e., start and end dates):
- 8) Objectives and Outcomes of Project/Program:
 - Include measurable objectives/outcomes;
 - Note specific activities through which the Program/Project Objectives and Outcomes are to be achieved;
 - Describe evaluation plan to assess if Objectives and Outcomes are met and that anticipated impacts are made;
 - Articulate how this Program/Project directly impacts Miami Shores residents;
 - Estimate the number of individuals—and in what age groups—who will directly benefit from the Program/Project. Of these individuals, approximately what percentage of participants will be Miami Shores residents?
- 9) Will the Organization be Collaborating or Partnering with other Miami Shores Organizations or entities on this Program/Project?
- 10) How will the Program/Project be Delivered (e.g., in-person, virtual or hybrid)?
- 11) If funded, how will Public be made aware of *Miami Shores Community Alliance* support (e.g., website, printed programs, marketing materials)?
- 12) Grantees will have until the November, 2024 meeting following funding in which to evidence (1) that the Program/Project has concluded or is in-process, (2) that granted monies have been effectively used in connection with the proposed Program/Project, (report even if monies are not spent) and (3) that the community of Miami Shores Village has directly benefited from the Program/Project.
 - What evidence(s) do you anticipate being able to provide the MSCA Board of Directors to demonstrate all three aspects noted above?
 - High quality videos and/or photos with photo release are required, along with receipts.
- 13) Optional: Additional Remarks or Comments:
- 14) Optional: If you intend to submit any supporting documents to this application, please list them below and note their relevance to this application.