

**TOWN OF SNOWMASS VILLAGE
COMMON GRANT APPLICATION
For Year 2016 - 2017 Disbursement**

**CITIZEN'S GRANT REVIEW BOARD
MUNICIPAL CODE OF ETHICS**

Related to the Municipal Code of Ethics, Sec. 2-93, Prohibition against gifts and favors. No official or employee shall accept any valuable gift, service, loan, thing of value, favor, promise or other valuable consideration as defined in Section 24-18-104(2) and (3), C.R.S. from any person or entity, which may tend to influence the discharge of official duties or give the appearance of undue influence.

(Ord. 13-1992 §2, Ord. 10-1997 §2, Ord. 9-2001 §1)

**APPLICATION DIRECTIONS & PROCESS - READ CAREFULLY CHANGES IN THE
LAST FEW YEARS**

1. Application must be submitted **electronically or one hard copy** 8 ½ x 11" paper double sided with at least a 1-inch margin on the left and right side and numbered at the bottom center of each page.
2. **Please submit only the information requested.**
3. Please answer the following questions in the following order: (Include topic headings at the beginning of each new section and the bullet-point questions prior to each answer. Please limit your information to six pages, plus the three attachments listed on page four.

ORGANIZATION SUMMARY (see attached)

PROGRAM/PROJECT BUDGET (see attached)

AGENCY INFORMATION

- Mission Statement (brief statement of organization's goals and objectives)
- Brief summary of organization's history
- Description of current programs, activities and accomplishments.

PURPOSE OF GRANT

- Description of goals and objectives for the purpose of this grant.
- Description of activities planned to accomplish these goals (is this a new or ongoing activity on the part of the sponsoring organization?)
- Timetable for implementation.

- Please list any appropriate partners and their contributions to the project or organization.

EVALUATION

- What will be the measurable outcome (for example: How many communities or people will this project serve? Are youth involved? etc.)
- How will the organization define and measure success?
- How will the project's results be used and/or disseminated?
- To what degree will the project and/or organization have a long-term sustainable value to the community of Snowmass Village?

FUNDING

- List all sources of funds and the level of funding provided by any partners that go towards your organization and/or project. (Distinguish between secured funding and potential funding from each source.)

4. Submit a hard copy to Rhonda B. Coxon, TOSV, P.O. Box 5010, Snowmass Village Colorado 81615 or an electronic copy to rcoxon@tosv.com for distribution to the Citizen Grant Review Board.

ORGANIZATION SUMMARY

Organization Name:

Mailing Address:

Contact Person:

(Name) _____ (Title)

Phone: _____ Fax: _____

E-mail: _____

Federal Tax ID: _____ State Tax ID: _____

Brief Description of Request and why the purpose of your grant request is important to Snowmass Village:

(Please limit your response to two paragraphs.)

Amount of Request: \$ _____

Number of Snowmass Village Residents, Employees and/or Visitors that participate and/or benefit from this organization and/or the program that you are proposing: _____

In what way do they participate or benefit?

Has your organization applied for a grant from the T.O.S.V. before? YES _____ NO _____

If so when was the last year your organization applied? _____

Did your organization receive a grant payment (a check) from the Town of Snowmass Village in March of 2016? YES _____ NO _____

How much was the grant for? \$ _____

How was the grant money used?

Attachments:

1. Board of Directors and Key Staff
2. Most recent financial statements
3. Copy of Organization's IRS determination letter indicating tax-exempt status

PROGRAM / PROJECT BUDGET

PROGRAM
NAME: _____

Itemize: (Personnel, promotion, supplies, services, etc.)	Amount:
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total Cost (A)	\$ _____
Funds available for Program:	
Gifts & Grants/pledged or paid (If applicable)	
Trustees:	\$ _____
Corporations:	\$ _____
Foundations:	\$ _____
Individuals:	\$ _____
Government	\$ _____
Other (earned income, special events, memberships)	\$ _____
Total Funds Available (B)	\$ _____
BALANCE REQUIRED (A minus B)	\$ _____
AMOUNT REQUESTED	\$ _____

The Citizens Grant Review Board will be using this Criteria when reviewing your application

“Health and Human agencies that provide a continuum of health care services including prevention, intervention, treatment, education and outreach programs, regardless of the clients ability to pay and community non-profit organizations that address community problems and enrich the quality of life in Snowmass Village”

This criteria was approved by the Town Council at their Regular Meeting on Monday, November 7, 2016.