

COMMUNITY FOUNDATION OF CENTRAL ILLINOIS (CFCI) GRANT GUIDELINES

Applications are due: March 15th & September 15th

The Community Foundation's purpose is to assist projects in the fields of education, arts, health, human services, community service or community development, community issues and to advance one or more of the following objectives:

- Address and help resolve important existing or emerging community issues
- Support new and creative projects and offer the greatest opportunity for positive change
- Promote cooperation and collaboration among other local organizations
- Identify, enhance and develop leadership in the community through creative and innovative ideas that empower individuals
- Improve the quality or scope of charitable work in our community

CFCI does not provide grant funding for annual campaigns, individuals, endowments, or make grants for sectarian religious purposes.

Nonprofit organizations within a 50-mile radius of Peoria may submit:

A grant proposal of up to three pages, collated & unstapled. Please include **seventeen (17) copies**
NO COVER LETTERS

Please follow these guidelines and provide the following information in this order with these headings:

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| 1. Completed CFCI Authorization Form
(proposal to follow may be up to 3 pages) | 9. Will the project take place with partial funding? |
| 2. Name, Phone, Address, E-mail and Amount requested | 10. How will the grant be publicized? |
| 3. Summary statement of the project | 11. Brief summary of the organization's history and mission |
| 4. Specific purpose of the funds requested | 12. List of all grants received and pending for this project AND all grants received from the CFCI within the last 24 months. |
| 5. Project timeline | 13. Evaluation plan used to measure the success of project |
| 6. Need for the project in the community | |
| 7. Detailed program budget | |
| 8. Other current and potential sources of funding | |

In addition, one (1) copy of the following items must be submitted with each proposal:

- One detailed copy of the organization's latest annual operating budget.
- One list of the organization's Board of Directors and Officers.
- One copy of the organization's IRS (Federal) tax-exempt letter.
- One copy of the organization's Form 990 or most recent annual financial statement independently audited.

Application Dates

The Distribution Committee will review grant proposals two times a year. **Proposals must be in the CFCI office by 4:30 pm on application deadline dates (see above).** If the deadline falls on a holiday or weekend, applications will be accepted the next business day.

Our goal is to review applications and notify you of your status within a two to three month period. Naturally, not all projects can be funded. A denial should not be viewed as a negative reflection on your work, and rather a reflection on the amount of funding available. You will be notified in writing on the status of your grant. CFCI will consider grants of up to \$15,000 and multi-year grants.

Incomplete Grant Proposals Will Not Be Reviewed.

Questions? Please contact the Community Foundation of Central Illinois, 331 Fulton St., Suite 310, Peoria, Illinois 61602. Phone: 309.674-8730 or e-mail: kristan@communityfoundationci.org.



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AUTHORIZATION FORM

Please send this page, along with all other required documents, by the application deadline to:

Community Foundation of Central Illinois
331 Fulton Street, Suite 310
Peoria, IL 61602

Organization Name: _____

Project Name: _____

Amount Requested: \$ _____

Phone # of Undersigned: _____

E-mail of Undersigned: _____

The undersigned, an authorized officer and the primary contact personnel member, certify that the information set forth in this grant application and its accompanying documents is true and correct, that the attached Federal tax exemption determination letter has not been revoked and the present operation of the organization and its current resources of support are not inconsistent with the organization's continuing tax exempt classification as set forth in such determination letter.

_____ Signature of Primary Contact *	_____ Print Name / Title	_____ Date
_____ Signature of Officer*	_____ Print Name / Title	_____ Date

*Not valid without both signatures.

