

A Touchstone Energy® Cooperative 🔨

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Application Procedures for Operation Round Up Grant Funding

NO HANDWRITTEN APPLICATIONS WILL BE ACCEPTED

South River Electric Membership Corporation administers Operation Round Up through the Community Assistance Corporation.

NON-PROFIT AGENCIES

- Non-profit agencies in Harnett, Cumberland, Sampson, Johnston and Bladen counties may apply for up to \$5,000 <u>annually</u> to implement programs or purchase needed equipment to facilitate a program, which will help in our local communities.
- Funding goes only to agencies within areas that South River EMC serves.
- Funds cannot be used to pay salaries or for general operational expenses. Funding must be targeting a specific program/project.
- Funding cannot be given to local and state government agencies.
- If an organization with a 501(c)3 has multiple programs, each program must operate separately and have separate boards of directors to be considered more than once in a 12-month period.
- Must attach appropriate bids, estimates, and bills directly relating to request.
- You must include a detailed itemized budget to support your request.
- Tax forms *will not* be accepted in place of an operational budget.
- Individual churches will not be considered for funding. Only religious-based programs that are collaborative communitybased efforts among multiple churches or groups. Exceptions include church-sponsored programs that are run separately from the church and are self-sufficient (i.e. childcare centers that are open to the community and are run by a separate board of directors/trustees).

EDUCATIONAL INSTITUTIONS

• DO NOT complete this application. Educational institutions must complete the application titled, "CAC School Application."

General Information:

- Operation Round Up grants are awarded by the Community Assistance Corporation each calendar year in March, June, September and December.
- Notification of funding will be made by the last day of the funding month. For example, if you submit an application for the September distribution, your organization will be notified by the last day of September if it has or has not been awarded a grant.
- The appropriate application must be completed on the form provided. Packets submitted with re-created applications for "see attached" will be disqualified.
- Individual churches will not be considered for funding. Only religious-based programs that are collaborative communitybased efforts among multiple churches or groups. Exceptions include church-sponsored programs that are run separately from the church and are self-sufficient (i.e. childcare centers that are open to the community and are run by a separate board of directors/trustees).

Proposal Letter

The grant application must include a proposal letter along with the grant application and requested attachments. The proposal letter should be brief and concise, not to exceed two pages, single spaced, and should be signed by a designated representative.

The letter should include:

Incomplete applications will not be considered for funding.

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- An introductory description of the program and its impact on the community- be sure to include as much detail as possible the specific reason for your request (counties and areas included) and the number of people your project will affect. *Do not include these guidelines pages with packet.*
- The amount of funding requested and the amount of the program/project budget.
- The need and specific population (including age, gender, and cultural background) which the program addresses.
- Specific objectives of the program/project and how success will be measured.
- Relationship of program/project to other services in the community, which may be designed to meet the same or similar needs.
- Other sources of funding pending (and when the funding may be received) and amounts already committed.

CHECKLIST:

- □ Please be sure your proposal letter contains all the information outlined in the basic instructions and appropriate signatures (place behind application).
- □ Attach copy of IRS letter indicating tax-exempt status and/or Federal ID Number.
- □ Attach copy of organization's mission statement.
- \Box Attach list of current board of directors.
- □ Attach copy of most recent and previous year's operational budget/ financial statement (to include expenditures and income NOT tax forms)
- □ Attach appropriate bids, estimates, and bills directly relating to request.
- □ Attach a *detailed, itemized budget* to support your request.
- □ If your organization is less than one year old, provide the most recent budget statements.
- \Box Please send the complete application packet to sremc@sremc.com.

Program must have been in operation at least one year to qualify for funding.

For more information, contact the Vice President of Member Services and PR at sremc.com or 910.230.2982.





Donation Application for Organization/Agency *This form must be used in the application process, do not use "see attached." This application must be the top form in your* packet.

	Date Completed				
1.	Name of Organization				
2.	Address City, State Zip				
3.	Contact Person E-Mail				
4.	Phone Number Alternate				
5.	A copy of your organization's financial statement from a previous year MUST be attached to this application.				
6.	. Is the organization requesting funding exempt from the payment of income tax? Yes \Box No \Box				
7.	. What is the general purpose or goal of the organization?				
8.	What will the requested funds be used for? How will the grant help your organization achieve its goal?				
9.	Amount Requested (please attach an itemized budget) \$				
10.	How will this amount help your organization achieve its goal?				

11. Is the amount requested the total amount needed? Yes \Box No \Box

If no, what is the amount needed?

- 12. What are your agency's administrative costs?
- 13. What communities are served by your agency/ organization?
- 14. Approximately how many individuals or families do you serve?

Of the population you serve, approximately what percentage lives in South River EMC's service area?

Does your facility receive electric service from South River EMC? Yes \Box No \Box

15. Please list other sources of funding for use of request as described on the first page. What has your organization already done to raise the amount needed?

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16. How are your organization's programs measured for effectiveness?



- 17. **CONTINGENCY PLAN:** If we are unable to award a grant for some or your entire requested amount, what alternatives do you have?
- 18. How did your organization find out about Operation Round Up?

- 19. If funded, how will your agency recognize Operation Round Up as donor?
- 20. Will you accept partial funding? □ Yes □ No If you indicated yes, what is the minimum amount you will accept?

The information contained in this statement is for the purpose of obtaining funding from the Community Assistance Corporation on behalf of the undersigned. The undersigned understands that the information provided herein is used in deciding grant funding, and the undersigned represents and warrants that the information provided is true and complete and that Community Assistance Corporation may consider this statement as continued to be true and correct until a written notice of a change is provided. The Community Assistance Corporation is authorized to make all inquiries they deem necessary to verify the accuracy of the statements made herein.

Name of Organization						
Signature of Representative:		Date				

Completion of compete name serves as an electronic signature.

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- Attach copy of organization's mission statement.
- \Box Attach list of current board of directors.
- □ Attach copy of most recent and previous year's operational budget/ financial statement (to include expenditures and income NOT tax forms)
- Please include <u>one</u> copy of any publications that describe your organization. For example- brochures, pamphlets, organizational charts, etc. These should be attached to the original copy only.
- Attach appropriate bids, estimates, and bills directly relating to request.
- Attach a *detailed, itemized budget* to support your request.
- □ If your organization is less than one year old, provide the most recent budget statements.
- □ *Please send the complete application packet to sremc@sremc.com.*