



City of Oakley Non-Profit Grant Application

Eligibility Checklist

Organizations are eligible to apply if they can answer “yes” to the following questions.

Eligibility Questions	Yes	No
Is your organization a 501(c)3 nonprofit organization with recognized legal status equal under the United States Internal Revenue Code?	<input type="checkbox"/>	<input type="checkbox"/>
Do you serve Oakley residents or businesses through your services or programs?	<input type="checkbox"/>	<input type="checkbox"/>
Does your organization have up-to-date filings (business license, taxes, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>
Is your organization capable of administering grant funds in compliance with federal funding guidelines?	<input type="checkbox"/>	<input type="checkbox"/>
Will an authorized representative be able to agree to the term of, and sign off, on the City’s “Grant Agreement Template”, including the insurance requirements?	<input type="checkbox"/>	<input type="checkbox"/>

Application Checklist

- Application Form
- Budget Attachment
- Documentation of 501(c)3 status

Non-Profit Organization Information

Project Name: _____

Organization Name: _____

Address: _____
Street Address *Apartment/Unit #*

City *State* *ZIP Code*

Primary Contact _____
Name *Title*

Phone: _____ Email _____

Organization Mission Statement

Project Description

Funds Requested:

Briefly describe the program/project you are requesting funds for. _____

Have you received other COVID-19 relief funding related to this program or project? **Yes** **No**

Community Benefits

Describe the need for the program/project you're proposing.

What populations will benefit from the proposed project and how? How many individuals, families, or other populations be served by this program/project?

Describe 2-3 anticipated measurable outcomes for your proposed project/program.

Budget Narrative and Organizational Capacity

Briefly explain project revenues and expenses related to this proposal. Please summarize major costs and other sources of revenue, including matching funds, if applicable. This should match the figures in the Budget Attachment. (Note: matching funds are not required.)

Will you be able to leverage the grant funds to expand the impact of ARPA funds?? Yes No

Describe your entity's experience and capacity to manage, implement, measure, and report on grant deliverables and use of funds.

Disclaimer and Signature

I certify that I have read and understand the non-profit grant RFP in its entirety and that my answers are true and complete to the best of my knowledge. By signing below, an authorized representative of the non-profit certifies under penalties of perjury that this bid or proposal has been made and submitted in good faith and without collusion or fraud with any other person.

Signature: _____ Date: _____