

FY 2022 Annual Grant Application

(Agency Name)

(Executive Director)

(Contact Person)

(Mailing Address)

(Phone Number)

2022 City Grant Request:

2021 City Grant Allocation:

(Excludes Special Appropriations)

Dollar (+/-) Over Last Year's Allocation:

Percent (+/-) Over Last Year's Allocation:

For City of Tuscaloosa Use:

2022 Actual City Grant Allocation:

Please electronically submit your funding application, financial statements, annual report, three-year budget data, and other information to agencyapplications@tuscaloosa.com no later than **Tuesday, June 1, 2021 by 5:00 p.m.**

Document Checklist

Place each Exhibit after the last page of Grant Application

1 copy of each Exhibit and Grant Application

Exhibits		(✓)
Exhibit A	Reason for requested funding? Explain Give program name, summary and specifics on how City funding will be used to better serve the community.	
Exhibit B	Collaboration (Attached) Provide information about your agency's services and partnerships.	
Exhibit C	2021 Fundraising/Event Form (Attached) Include every fundraiser/event in 2021. Make sure to include the final gross amount of proceeds on form.	
Exhibit D	2021 Funds from Other Governments and 2022 Requests from Other Governments	
Exhibit E	Budgetary Impact/ Financial Assistance (Attached) List all sources that you have applied with to receive financial assistance relating to COVID-19. Be sure to include the amount that you applied for as well as the amount that has been awarded or received.	
Exhibit F	Most recent Board of Directors Include all Board Members contact information including email address and place of employment.	
Exhibit G	Agency Staff/Administration Include all agency staff/administration with their email address.	
Exhibit H	Organizational Changes Provide information on any upcoming major organizational changes or additional information that has been voted on by your board for the next three years	
Exhibit I	Provide a List of Investments Include an explanation of each investment. Also, include agency operating reserves	
Exhibit J	Co-Signer Statement Provide a statement that the agency requires an officer of the agency's board to co-sign all checks. However, if an agency has submitted an audit to the City, it is not required to submit this statement or engage in such practice.	
Exhibit K	Certification Statement Provide a written certification that a copy of the agency's financial and annual report, including the management letter, is on file at the Tuscaloosa Public Library for public viewing.	
Exhibit L	Current Annual Report	
Exhibit M	Budget for 2020, 2021 and 2022 (proposed) Include explanations for increases and decreases.	
Exhibit N	2020 or Latest Audit (1 Copy Only) Review if between \$25,000 and \$50,000; Compilation if less than \$25,000.	
Exhibit O	Latest signed W-9 Form	

City of Tuscaloosa Common Application Form

Administrative Information

1. Legal Name of Applicant Organization:

Note: Legal name should be same as on IRS determination letter.

2. EIN: _____ 3. Year Founded: _____ 4. Current Year Operating Budget: _____

5. Web Site: _____

6. Executive Director:

Name: _____ Title: _____

Mailing Address: _____

Phone: _____ Fax: _____ Email: _____

7. Primary Contact Person (if different from the Executive Director):

Name: _____ Title: _____

Mailing Address: _____

Phone: _____ Fax: _____ Email: _____

8. Has the City of Tuscaloosa allocated funds to your organization in the past? If so, please list the amounts for the last three years.

9. Executive Director (print): _____ Date: _____

Signature: _____

Note: Signatures indicate that the document was reviewed and approved by the Board of Directors who is solely responsible for the content and accuracy of information.

Administrative Information

10. Provide a brief agency history and state the agency's mission statement.

11. Board/Staff Composition:

		Gender			Race			
		Male	Female	Total	White	Black	Other	Total
Board								
Staff								

12. Total Unduplicated Clients Served:

Note: If your agency can NOT document unduplicated clients served, you can NOT count them.

Last Year Actual 2020	This Year Projected 2021	Next Year Proposed 2022

Collaboration

COMMUNITY PARTNERSHIPS:

Describe collaborative efforts with other nonprofit or for-profit organizations, and/or governmental agencies that play a specific role in your agency.

SOCIAL SERVICE PROVIDER ANALYSIS:

Identify other organizations in the City of Tuscaloosa or adjacent communities that provide similar services. List the name of the organizations and the programs, activities, or projects that are similar with your agency.

COOPERATION WITH SERVICE PROVIDERS:

Describe how your organization is cooperating with the previously identified organization and programs.

NEED FOR PROGRAM:

What evidence do you have that there is a need or demand for your program in Tuscaloosa? Please provide specific information below. Cite sources.

UNIQUE SERVICE PROPOSITION:

Describe how your program serves a special population, offers unavailable services, or sets itself apart from similar local programs.

Fundraising/Event Information Form

Name of Fundraiser/Event: _____

Location and Date of Fundraiser/Event: _____

Brief Description of Fundraiser/Event: _____

Final Gross Proceeds: _____ Final Total Expenses: _____

Net Income: _____

Name of Fundraiser/Event: _____

Location and Date of Fundraiser/Event: _____

Brief Description of Fundraiser/Event: _____

Final Gross Proceeds: _____ Final Total Expenses: _____

Net Income: _____

Name of Fundraiser/Event: _____

Location and Date of Fundraiser/Event: _____

Brief Description of Fundraiser/Event: _____

Final Gross Proceeds: _____ Final Total Expenses: _____

Net Income: _____

Name of Fundraiser/Event: _____

Location and Date of Fundraiser/Event: _____

Brief Description of Fundraiser/Event: _____

Final Gross Proceeds: _____ Final Total Expenses: _____

Net Income: _____

Budgetary Impact/ Financial Assistance

Due to the effects of COVID-19 on the City's budget, it is required that all agencies provide supplemental information to assist in our decision-making process. Therefore, please answer the questions below thoroughly.

Please provide a brief description of how your organization has been effected by COVID-19.

Should the City reduce funding to your agency, please provide any program changes that your agency would make for FY 2022.

Should the City reduce funding to your agency, are you in a position to utilize reserves to make up for any funding deficits?

YES

NO

Do you anticipate utilizing any reserves to cover any operating/funding deficits?

If yes, how much do you anticipate using?

YES

NO

