

**The STEP Foundation
GRANT APPLICATION FUND(S) FORM**

Date: _____

Please select which Fund(s) you are applying for.

_____ **General Endowment Fund:** Grant Funding is Eligible for Fifty Percent of the Total Project Cost

_____ **Glen J. Meyer Advisory Fund:** Projects within Nemaha County

_____ **Nate and Bernardine Rettele Fund:** Projects to be used for Recreation, Beautification, and
Aesthetic purposes for the Immediate Seneca Area

_____ **Nemaha County Dementia Fund:** To provide funding to local long term care facilities,
Hospitals, or home health agencies which services individuals with
Dementia.

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GRANT APPLICATION FORM**

Date: _____

Specific Fund(s) for Request: _____

Name of Organization: _____

Mailing Address: _____

Contact Person: _____ Telephone: _____

Authorized Signature: _____ Title: _____

Briefly describe the Applicant Organization, the Programs and the Population served:

Total Cost of the Proposed Project/Program: \$ _____

Amount Requested from the STEP Foundation \$ _____

Answer the following questions to complete the grant application:

- A. **Problem/Purpose:** Describe what the project will accomplish, including the benefits of this project to the community.
- B. **Implementation:** Include a timeline of the project.
- C. **Size and Duration:** Explain the scope of the project in terms of numbers of people who will benefit and the duration of this benefit to the named groups or people.

- D. Coordination: Are there any coordinating efforts between other entities to fund this project and if so, please explain the arrangement between the parties involved. List other organizations, foundations or government entities to whom you have applied for funding and the results of those requests.
- E. Continuation: Will this project require continued funding? If so, identify the source of this future funding.
- F. Evaluation: Once completed, how will you determine that this project has accomplished its purpose?

ADDITIONAL SUPPORTING DOCUMENTS REQUIRED WITH APPLICATION

- Names and title of Organization's Leadership, including trustees, directors, board officers, and or key volunteers (Label: A)
- Operating Budget for the Current Year, including a list of principle sources of income (Label: B)
- Financial Statements from Applicant's most Recent Year-end, including audited statements if available (Label: C)

The above material may be submitted in any fashion that represents the least amount of work for the organization, yet completes our records. If you have made application for a grant to the Foundation in the past, please feel to inquire about what information we may already have on file. If your organization has received a grant from the Foundation in the past, indicate the following:

Date _____ Amount _____ Project _____

BEFORE AN APPLICATION WILL BE PROCESSED THE SUPPORTING DOCUMENTS MUST ACCOMPANY THIS APPLICATION OR YOU MUST CHECK TO BE SURE THEY ARE ON FILE WITH THE FOUNDATION

MONITORING AND EVALUATION

The STEP Foundation requires the Organization to which a Grant has been awarded to:

- Request Payment as needed, or as requirements are met
- Report in some detail how the Funds are expended, including invoices
- Report as to how the Project accomplished its Purposes.

The Foundation intends to periodically visit, request information, or in some manner monitor the project.

GRANT DEADLINE DATES

January 15
July 15

DECISIONS

3rd Monday of March
3rd Monday of September

RETURN ALL OF THE ORIGINAL WHITE PAGES PLUS REQUIRED ATTACHMENTS TO:

Nemaha County STEP Foundation
Grant Review Committee
PO BOX 165
Seneca, Kansas 66538