



2021-2022 EPCO Small Grants Reimbursement Program Application

The East Portland Community Office Small Grants Reimbursement Program supports community building and community activities in East Portland. A total of \$47,000 in funding is available for this grant cycle to be awarded to East Portland organizations and groups. Requested amounts may range from \$2,900- \$4,900. Funds will be eligible for reimbursement for programming expenses starting July 1, 2021 – June 30, 2022.

To qualify, your project must meet at least one of our program's goals:

- Increase the number of people who are involved and engaged in their communities;
- Strengthen community capacity through, for example, leadership development, skills building, fostering teamwork and/or partnerships, and community building;
- Increase community impact on public decisions.

Civic Life will only award grants to registered 501(c) 3 non-profit. If your entity is not registered as such, please seek a fiscal sponsor that is a,

- a) 501(c) 3 non-profit,
- b) government entity, or
- c) business that is registered with the City of Portland.

The Small Grants Program prioritizes engagement of communities historically underrepresented and underserved by our programming such as elders, youth, people with disabilities, Black, Indigenous and other People of Color, Immigrant and Refugee communities, low income individuals and families, and LGBTQIA+ people.

1. Group or Organization Name:
2. Fiscal Sponsor Name (if you have one):
3. Project Title:
4. Tax ID Number for Organization or Fiscal Sponsor:
5. Mailing Address for Organization or Fiscal Sponsor:
6. Does your organization or your fiscal sponsor carry insurance coverage?
*This question does not impact your eligibility or chances of being selected. If you are chosen for this grant, you may be required to provide proof of insurance, depending on the activities being funded. If selected, staff will work with you to make sure you know which insurance requirements apply to your grant. For more information please refer to the Insurance section of the Instructions Page.

Yes

I Don't Know

No

7. Project Coordinator Name and Contact Information:

Name:

Email:

Phone Number:

8. Alternate Contact Name and Contact Information

Name:

Email:

Phone Number:

9. Provide a short description of your project.

*Describe the project and how the funds will be used.

200 words or less

10. Please tell us about your group or organization. Is your group or organization comprised of members of the communities you work with?

*Project teams can include individuals in the community or partner organizations.

100 words or less

11. What is your project timeline?

*Please list the activities to be completed during this program, including your expected start and completion dates and any major project milestones. If this project has already started please indicate start date. Can be in outline format.

100 Words or less

12. Describe who will participate in your proposed program and how outreach will be conducted? The Small Grants Program prioritizes engagement of communities historically underrepresented and underserved by our programming such as elders, youth, people with disabilities, Black, Indigenous and other People of Color, Immigrant and Refugee communities, low income individuals and families, and LGTBQIA+ people. How will people from these groups be engaged?

200 words or less

13. Which grant program goals does your project meet?

Increase the number and diversity of people who are involved and engaged in their communities

Strengthen community capacity through, for example, leadership development, skills building, fostering teamwork and/or partnerships, and community building

Increase community impact on public decisions

Please Explain

100 words or less - Continued on next page

14. What specific neighborhood of East Portland does your programming take place in?
*If you do not know your neighborhood, please refer to this map of all neighborhoods of East Portland.

Parkrose

Parkrose Heights

Argay

Russell

Wilkes

Hazelwood

Glenfair

Centennial

Powelhurst-Gilbert

Lents

Pleasant Valley

Mill Park

15. Describe what steps, if any, you will take to address the accessibility needs for your participants.

*For example, this may include ASL interpretation, language translation services, an ADA accessible venue, public transportation access, providing childcare or virtual participation option, etc. This would be anything that made participation easier for people.

100 words or less

Budget

In this section, we ask for details about your funding request. Think about your proposal and how you plan to use the funding if selected.

Funding requests must add up to no less than \$2,900 and no greater than \$4,900.

For each box that you check, please tell us how much funding you are requesting in that category and how you plan to use the funds.

Have you received or will you be receiving funding from any other source for this project?

Yes

No

Please specify Amount and Sources

Programming Materials, Equipment, Supplies for grant proposal project

*Examples: printed materials, food for events, technology purchases, website subscriptions relating to the project, tools & equipment for programming.

*Material, equipment, supplies include items to be purchased or rented for the proposed project (e.g. printing, transportation costs).

Funding amount requested in this category: \$ _____

What would you buy? How do you plan to use these items?

Suggested length: 50 words or less.

Staff and Volunteer Time and Community Participation

*Staff/Volunteer time relates to administrative costs associated with the proposed project, insurance, contractors and staff services for the project. Donated time and services will not be reimbursed but will provide insight into the impact of your project on the community.

*Examples: Staff hours relating to proposed project, volunteer related expenses, admin expenses related to the project (admin expenses cannot exceed 10% of total budget)

*Requesting funding in this category may require higher levels of insurance coverage compared to the other funding categories. See instructions for more details.

Funding amount requested in this category: \$ _____

How do you propose to use the funds? What would the staff/volunteers be doing?

Suggested length: 50 words or less.

Contracted / Paid Services

Professional services relate to administrative costs, fiscal administration fees, insurance, contractors and staff services and expenses for the project.

*Examples: Paying for translation and interpretation services, workshop and meeting facilitation, marketing and advertising services related to the proposed programming, programming event artist/performers.

Funding amount requested in this category: \$ _____

What services would you contract? What would the contractor be doing?

Suggested length: 50 words or less.

Other

Other is the category for those costs that do not fit into any listed category.

*If you have any other funding requests related to your proposal that are not already captured above, please describe them here.

Funding amount requested in this category: \$ _____

Please describe what you would like to pay for and the purpose of the purchase. Suggested length: 50 words or less.

TOTAL GRANT REQUEST: \$ _____

* Add up the amounts from each of the previous budget category sections.

* The minimum request must be at least \$2,900 and the maximum request can be \$4,900.

AGREEMENT AND SIGNATURE

If I am selected to receive grant funds, I agree to:

- Attend the grant orientation workshop. Schedule to be announced.
- Acknowledgement of the Office of Community & Civic Life and EPCO on all promotional materials, this includes logo placement and specific verbiage when appropriate. These will be provided.
- Submit final progress report within 30 days of the completion of my project. The final report should include:
 1. Project Evaluation;
 2. Program photographs;
 3. Electronic copies of any brochures, flyers, or other printed materials; and
 4. Final expenses report including itemized costs and receipts.

By signing and/or printing my name below, I accept the terms listed above. All information contained herein is true to the best of my knowledge, and I understand that any misstatement of fact or misrepresentation of credentials may result in this application being disqualified from further consideration.

Signature: _____

Printed Name: _____

Date: _____