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City of DeFuniak Springs

APPLICATION FOR CITY FUNDING

Deadline for Small - Scale activities conducted by non-profit organizations, between Oct 1, 2020 and Sept 30, 2021 (Fiscal Year 2020-2021) is **June 15, 2020**.

1. Name of Organization: _____

2. Amount Requested: _____

3. Contact Person: _____

4. Mailing Address: _____

City: _____ State: _____ Zip Code: _____

5. Work Telephone: _____

6. Cell Phone: _____

7. E-mail Address: _____

8. Organization's IRS 501(c)(3) Taxpayer I.D. Number: _____

9. Date Application Submitted: _____

Applications will receive consideration without discrimination because of race, color, religion, sex, age, national origin or disability.

10. What is the overall purpose or goal of your Organization?

11. How long has your Organization been in existence? _____ Years

12. Briefly describe the activities or services of your Organization:

13. How many paid employees/volunteers assist your Organization?

Full time employees ____ Part time employees ____ Volunteers ____

14. Describe how your Organization is managed and governed:

15. Contact information for the head of your Executive Board, or other "in-charge" person:

Name _____ Title _____ e-mail _____ Phone _____

16. For the period October 1, 2019 to September 30, 2020, what is the *estimated* current annual operating budget of your organization? \$ _____

17. For the period October 1, 2020 to September 30, 2021, please estimate your organization's *anticipated* annual operating budget. \$ _____

18. Has your Organization been funded by the City of DeFuniak Springs previously?

Yes ____ No ____ If yes, when and for how much?

19. Need Statement: Clearly and plainly state the specific, detailed need for the requested funds:
(Attach additional sheet, if necessary)

20. Addressing the need: Describe how the city funds will be used to address the needs described in Question 19:

21. Impact and results: Describe the benefits or impacts resulting from these requested funds, including how you intend to measure that impact.

22. Check the *one* category that *best matches* how the funds will be used:

Recreation Cultural Health Aesthetic Social Educational

Other (specify) _____

23. Attach a summarized copy of your Organization’s Operating Budget for the current year.

24. Attach a copy of the organization’s current IRS Form 990.

Remember: the deadline for receipt of applications is June 15, 2020.

Submit one stapled original and 11 stapled copies of the application.

Evaluation Criteria for City Nonprofit Applications

Applications will be judged on the following five criteria:

1. Thoroughness and completeness of the application and its attachments.
2. The extent to which the activities using city funds are properly aligned with the organization’s overall mission, purpose, and capacity
3. The extent to which the need or problem is clearly described, is true, and it is accurate.
4. The extent to which the activities which use city funds are appropriate and valid strategies to address the need or problem
5. The extent to which the activities using city funds are likely to achieve the desired benefit or impact stated by the applicant.