

Auburn's Community Matching Grant Program

Office of Equity

The City of Auburn's Neighborhood Program offers Community Matching Grants to create and support partnerships between the City of Auburn and community groups and organizations to produce resident-initiated projects. For further details about the program visit us online at auburnwa.gov/matchinggrants.

If you or someone from your community needs help filling out the application in a language other than English, please contact us to receive translation services.

For questions or to submit a Matching Grant application contact:

Chris Lovings Neighborhood Programs Coordinator 25 W Main St Auburn, WA 98001 <u>NeighborhoodPrograms@auburnwa.gov</u> 253-876-1988

Community Matching Grant Application Form

Community Name:	
Tax ID Number of incorporated entity (e	ither the HOA or partner agency):
Project Coordinator:	Phone #:
Email:	
Address for Project Coordinator:	
Partnering Organization (if applicable):	
	ator (if applicable):
Phone #:	Email:
Address for Partnering agency (if applica	

Why was the Project Coordinator(s) chosen or why did they volunteer for the position? (Please use additional paper if you need more space.)

```
Project Title:
```

Grant Type Requested (can mix different grant options, but total must not exceed \$2,500):

Community Improvement Grant (max \$2,500)

Focused on:

- Creating an attachment between residents and their community
- Supporting physical, social and mental well-being of residents
- Maintaining safe and beautiful communities in Auburn
- Increasing opportunities for residents to be civically engaged

Community Event Grant (max \$1,500) Focused on organizing community events including potlucks, block parties, holiday gatherings, and more.

Community Clean-Up Grant (max \$1,500) Focused on organizing community clean-up campaigns such as hauling-away junked cars, appliances, and renting temporary dumpsters.

Total Amount Requested: \$

Common Boundaries of the Target Community. You may attach a map with the area outlined or describe the boundaries relative to existing streets or other landmarks. (Please use additional paper if you need more space.)

Approximately how many homes/businesses are in your designated community group?

Summary of project and projected project timeline: (Please use additional paper if you need more space.)

Projected Outcomes and Benefits: How will your proposed project benefit your community Area? (Please use additional paper if you need more space.)

In your opinion, which of the following goals fits your project:

- ____ Creates an attachment between residents and their community
- _____ Supports physical, social and mental well-being of residents
- _____ Maintains safe and beautiful communities in Auburn
- _____ Increase opportunities for residents to be civically engaged
- ____ Other (please describe): _____

What steps are you taking, or plan to take, to include everybody who lives or does business in your area?

- _____ Door-to-door flyers
- Facebook group
- Email list serve
- _____Nextdoor
- Public Notices
- _____ School Flyers/Bulletins
- Advertisements
- Other, please describe:

How does your project involve and/or accommodate youth, seniors and special needs populations? (Please use additional paper if you need more space.)

Does the project require on-going maintenance? Yes <u>No</u> If yes, who will take responsibility for long-term maintenance?

Project Budget

What is the total cost for the project? \$____

How much are you asking for from the City? \$

How much do you propose to offer as a match (*this must be equal to, or more than, the amount you ask from the City*)? \$

How do you propose to satisfy your required match?

Volunteer hours.* Estimated hours

*If volunteer hours will be used to meet the match, please fill out the volunteer part of the Support Form.

____Cash match. Estimated cash \$_____

____Donation of materials

____Donation of services

Detailed Proposed/Estimated Project Budget Worksheet

*If your project will be done by a contractor, please provide the detailed estimate(s) from the contractor when you submit your application. If this is the case, and you are paying for half (or more) of the project cost as your match, the below worksheet is not required, the estimate(s) will be enough.

Community Match: What your group will do to meet the match. Detail the volunteer hours, cash match and/or services/items to be donated		City Funds (Matching Grant): Receipts you will submit to the City to be reimbursed by the Grant		
Dollar Amount	Description	Dollar Amount	Description	
Example: \$80 (2 volunteer hours valued at \$40/hr)	<i>Volunteer hours to install</i> beehive	<mark>\$80</mark>	Funds to purchase a beehive for installation	
Subtotal:		Subtotal:		

Final Project Total:

Volunteer and Support Form

Community Name: _____ Name of Project: ____

This form is part of an application for a Community Matching Grant from the City of Auburn. Its primary purpose is to make sure that residents are aware of the project. It also provides documentation that the applicants have adequate support to complete their proposed project. The person signing this form hereby supports the project and/or pledges to physically fulfill the volunteer hours shown below. These hours may be used to satisfy the match requirements for the grant. Intentionally providing false information may cause the Community Matching Grant to be revoked.

Name (print)	Address	Phone Number	Supports Project (Y/N)	Volunteer: # of hours pledged?	Signature

Name (print)	Address	Phone Number	Supports Project (Y/N)	Volunteer: # of hours pledged?	Signature

Total Number of Volunteer Hours Pledged:

Total Number of Volunteer Hours Completed:

Name of Grantee: _____

Signature of Grantee: _____

Date of Submission:

OFFICE USE ONLY

Does Volunteer Hours Completed Satisfy the Match?	Y	/	Ν
--	---	---	---

Name of Staff Member	Signature
----------------------	-----------