



APPLICATION - 2019  
CITY OF WORTHINGTON  
COMMUNITY GRANT PROGRAM

**ORGANIZATION NAME:**

**AMOUNT REQUESTED:**

**CONTACT NAME:**

**CONTACT ADDRESS:**

**CONTACT PHONE:**

**CONTACT EMAIL:**

**PURPOSE & ACTIVITIES OF THE ORGANIZATION:**

**AMOUNT REQUESTED IN CALENDAR YEAR 2019:**

**How will the grant funds be used?**

**(Please attached a budget for the program/project and clearly indicate the portion of the budget that is City funded.)**

**Are you proposing a multi-year program or project? If so, clearly explain the multi-year nature and how it relates to your funding request.**

**How will your program/project address the City's priorities:**

- 1a. Basic human necessities**
- 1b. Mental health services and/or community counseling**
- 2. Improvement of the Worthington community**

**What is the desired impact? How will you determine impact?**

**Please describe the people to benefit from the program or project. Include the percentage of them that are residents of the City of Worthington and the percentage that are residents of the Worthington School District.**

**Are you a membership-based organization? If so, note the percentage of your membership that are residents of the City of Worthington and also the percentage that are residents of the Worthington School District.**

**Have you received funding from the City of Worthington in the past? If so, please note when and for what purpose(s).**

**Please attach the following documents.**

- 1. Budget for the proposed program or project, clearly indicating the portion that is City funded**
- 2. Documentation of Non-Profit status**
- 3. Most recent financials, including most recent IRS filing, audit and/or financial review by a CPA.** (Note: Organizations that have applied within the past three years and whose financial reports are essentially the same since the last submittal do not need to submit new financials.)