



## **SMALL GRANTS PROGRAM**



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## Small Grants Fund Guidelines

The Empowerment Zone is a federal designation which provides grant and loan assistance to improve the quality of life and economic sustainability of residents, businesses, and organizations in East St. Louis, Illinois; Lemay, St. Louis City, and Wellston, Missouri. The Small Grants fund has been established to address some of the more immediate needs of EZ neighborhoods.

### Background and Purpose

The Small Grants Fund is a one-time, competitive award to fund short-term projects that work to create a sense of community within one or more of the neighborhoods located within the EZ. Projects must be designed to: (a) strengthen participation of EZ citizens in community activities, or (b) provide access to human development pivotal to building a healthy, vibrant community for all citizens.

### Eligible Applicants

Small Grant funds are available for existing organizations that are located within the EZ boundaries for organizations. You may check the EZ website at [www.stlouisezone.org](http://www.stlouisezone.org) to determine if your organization is within the eligible areas.

### Eligible Projects

Funds may be used for small projects including crime prevention, beautification, community development training and services for youth and underserved groups. The basic application criteria include the following.

- **Project or program must relate to bringing about improvement to the area and stimulating community involvement.** Examples are: neighborhood gateways, neighborhood clean-ups, training scholarships for capacity building in neighborhood organizations, or special events or programs that promote community in the EZ.
- **Project or program requests must fit allowable expenditures as defined by the EZ. A list of allowable costs will be available on the EZ website.** Ineligible projects include: business loans, endowment scholarships, direct religious activities, financial deficits, political organizations or candidates, courtesy advertising or tickets for benefits and national fundraising efforts.
- **Projects must occur within a one-year time frame from the time of award.**
- **Requests must be greater than \$2,500, not more than \$10,000.** The amount of the request must reasonably match the project or program costs. The total project amount may exceed the request, but must identify the source and amount of the matching funds.

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## Process

Applications are reviewed quarterly until allocated resources have been depleted. Staff reviews each application for completeness, accuracy and alignment with EZ mission goals. The applications are then forwarded to the Community Council where they are ranked based on their potential benefit to the EZ communities. The Community Development Committee of the Board of Directors renders funding decisions based on the recommendations of the Council.

Decisions will be awarded within a timely manner of the EZ's deadline. Deadlines are as follows:

	<b>Applications Due</b>	<b>Announcements</b>
<b>Summer 2003</b>	July 3	July 25
<b>Fall 2003</b>	September 12	October 15
<b>Winter 2003</b>	December 14	February 15

## Application Materials

Grant proposals for listed announcement date must be mailed or delivered by 5 p.m. of the application deadline. Proposals must include the application, supporting materials, and an original with four copies of all documents. Incomplete applications will not be considered. Faxes and emails will not be accepted.

To obtain a copy of the application, visit the EZ website: [www.stlouiszone.org](http://www.stlouiszone.org) or call Tara Buckner, EZ Community Liaison Manager, at 314-241-2083. Applications should be mailed to: Tara Buckner, Greater St. Louis Regional Empowerment Zone, Suite 540, 100 North Tucker Boulevard, St. Louis, MO 63101.

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## St. Louis Regional Empowerment Zone Small Grants Funds Application Packet

Date: \_\_\_\_\_

Please fill out this entire application. Under no circumstances will any application be considered if application is incomplete.

### Part One: Applicant Information

1. Name of Organization: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_
2. Contact Person: \_\_\_\_\_  
Daytime Phone Number: \_\_\_\_\_ Evening Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_ Email: \_\_\_\_\_  
Best time to contact: \_\_\_\_\_
3. What is the purpose of your organization? \_\_\_\_\_
4. Is your organization incorporated?  Yes  No  
If YES, please indicate how you are incorporated (i.e. 501c3, partnership, etc.). \_\_\_\_\_  
Enclose a copy of your IRS letter of determination.  
  
If NO, list your tax-exempt fiscal agent:  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_
5. Please provide a brief history of your organization, including when it was established and a description of any projects or work completed: \_\_\_\_\_
6. Proposed Project Name: \_\_\_\_\_
7. EZ Small Grant Funds Requested: \$ \_\_\_\_\_

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## Part Two: Project Information

Please write the question and a brief answer to each of the following questions (attach a separate sheet if necessary):

### I. Explanation of the Project

1. What are you proposing? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
2. What are the goals of the project? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. What steps will be used to carry out the project? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. Who will be involved in the project? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### II. Policy Alignment

5. Explain how the project fits into a community/neighborhood plan and/or community priorities. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. Explain how the project will have visibility within the community/neighborhood. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### III. Project Quality and Innovation

7. Does the project improve the quality of life in the Empowerment Zone? \_\_\_\_\_
8. Explain how the project is unique. \_\_\_\_\_  
\_\_\_\_\_
9. Will the project build upon community strengths? \_\_\_\_\_

### IV. Capacity Building in the EZ

10. Will the community/neighborhood benefit from the project as a whole? \_\_\_\_\_
11. What is the direct benefit to residents of the Empowerment Zone? \_\_\_\_\_  
\_\_\_\_\_
12. Will the project utilize any Empowerment Zone businesses? If so, what businesses will be used? \_\_\_\_\_  
\_\_\_\_\_



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17. Please identify the lead organization, staff, and any other partner organizations involved. \_\_\_\_\_  
\_\_\_\_\_
18. Discuss the capability of the lead organization to carry out the project. \_\_\_\_\_  
\_\_\_\_\_
19. If this project will be carried out in a collaboration with other organization, how capableness of the partners? (i.e. is there a history of the partners working together successfully?) \_\_\_\_\_  
\_\_\_\_\_
20. Can this project be completed within one year? \_\_\_\_\_
21. Please provide a timeline for the project. Outline when the project will start and what are the milestones or phases involved, the length of the project and when the project will be completed. Please note that Small Grants Projects must be completed within one year of the award.

**Example:** Playground Equipment

<b>Milestone</b>	<b>Date to be Completed</b>
Get bids	July 2003
Order equipment	August 2003
Install equipment	September 2003
Installation is completed	October 2003

## VI. Project Evaluation/Outcomes

22. How will you measure the success of the project? \_\_\_\_\_  
\_\_\_\_\_

### Part Four: Application Check List

- Completed Application Narrative
- Project budget
- Organization financial statement (not if government agency)
- Any Letters of support (not required)

I, the undersigned, \_\_\_\_\_ (insert office) of the Lead Agency, am authorized to submit this funding request on behalf of the Lead Agency and I hereby attest, as \_\_\_\_\_ of such Lead Agency, that the above information is true, complete and accurate.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

### Please submit the application to:

Tara Buckner, Community Liaison Manager  
St. Louis Regional Empowerment Zone  
100 N. Tucker, Suite 540, St. Louis, MO 63101

If there are any questions, please contact staff at 314-241-0002, Fax: 314-241-4099.