



**Grant Information:**

The City of Tolleson Community Grant Program provides direct monetary grants to help further nonprofit organizations for projects and activities that provide health and human services which improve the quality of life for Tolleson residents.

- **Individuals may receive up to \$1,500 maximum.**
- **Organizations may receive up to \$2,500 maximum.**

**Grant Application Process:**

There will be two (2) rounds of application for FY 2021-2022.

**All applications are due at 4:00 p.m.; late applications will not be accepted.**

- **Currently we are only accepting applications for Round 2  
Deadline to submit will be November 18, 2021.**

A subcommittee of City Council will review applications and make funding recommendations to the full Council.

**Criteria:**

Nonprofit 501(C)3 agencies are eligible to apply. In addition to the completed application form, please provide a copy of your IRS letter sanctioning your nonprofit status.

- Applicants must provide direct services and/or materials which improve the health and welfare of Tolleson residents.
- Applicants that received previous funding must be current in their reporting and have submitted timely and accurate quarterly reports. Organizations shall provide quarterly reports until all funds are expended, in addition to a final report of expenditures.
- Applicants must demonstrate the ability to generate revenue from other sources. The City of Tolleson shall not serve as the exclusive source of financial support for any applicant/program.
- Priority will be given to special projects; however, requests for operating support toward direct and measurable services will be considered. Administrative costs will be considered on a case by case basis for corporate applicants only, not for individual applicants. Corporations should show how funds are matched from other sources.
- Priority will be given to services and initiatives that support and address City Council values. Examples of initiatives that support Council values include opportunities for at-risk youth and children, housing and community development programs, asset development services, homelessness prevention, and healthy lifestyle initiatives.



- If funds are to be used to support a minor, the parent or guardian must sign the application and is responsible to make sure a final written report and/or presentation is submitted to Council within 90 days.

Applications are available for both individuals and corporations at [www.tollesonaz.org](http://www.tollesonaz.org).  
Applications must be submitted in electronic format, emailed to [msandoval@tollesonaz.org](mailto:msandoval@tollesonaz.org).

For more information, please contact Executive Management Assistant, Mario Sandoval at (623) 474 - 4630 or via email at [msandoval@tollesonaz.org](mailto:msandoval@tollesonaz.org).



**Individual Application:  
Cover Page**

**Section I: Individual Information**

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

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Currently only accepting Round 2 applications for the Tolleson Community Grant.**

**Round 2: Deadline: November 18, 2021 by 4:00 p.m.**

**Late applications will not be accepted.**

Name of the project/activity for which you are requesting funding:

\_\_\_\_\_

Please indicate the amount of funding you are requesting: \$\_\_\_\_\_



**Section II: Description of Community Project**

**Application Directions:**

Please provide comprehensive and clear responses to each of the sections below. Respond to all questions within each section; if a question does not apply to your entity, indicate this by responding “Not Applicable”. Applications must be typed, single-spaced and single-sided on 8½” x 11” plain white paper with 1” margins on all sides, or you may use this form for your responses. Times New Roman 12 point font or Arial 12 point font must be used.

**Application Questions:**

1. What are the specific objectives of this project?	
2. What is the ‘target’ community? (location and/or group)	
3. Please provide a brief description of the proposed project or funding requested. What are the expected benefits to the community?	
4. Why is the project and/or trip important to you and the community?	
5. Please provide any other information you think might be important to your application and project.	



**Section III: Project Budget**

Outline the costs of your project: supplies, airline tickets, printing, etc. (Where appropriate, please include written quotes). Give details of any other sources of funding you have already received, or are seeking, for this project.

Item	Funding Source	Amount (\$)
	Total Cost of Project:	
	Total Cost of Project You are Seeking Funding For From the Tolleson Community Grant Fund:	



**Section IV: References**

Please provide two letters of support from a teacher, counselor or community leader or recognized organizations, and attach them to your application. Provide contact information for these two references.

**Name of Reference 1:** \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Organization: \_\_\_\_\_

Position: \_\_\_\_\_

**Name of Reference 2:** \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Organization: \_\_\_\_\_

Position: \_\_\_\_\_

**Section V: Declaration, Instructions and Notes**

Declaration: I/We declare that the information supplied is a correct outline of the project, and that I/we agree to have information about our project available to the wider community. I/We also agree to provide the City of Tolleson Council with a final project report and/or presentation within three months of project completion.

Signature: \_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

Signature: \_\_\_\_\_  
Parent/Guardian, if applicant is minor

\_\_\_\_\_  
Date

**Completed grant applications must be submitted via email or electronically:**

**Round 2: Deadline: November 18, 2021 by 4:00 p.m. Late applications will not be accepted.**

<b>Via mail:</b> Tolleson Community Grant Application C/O Public Affairs City of Tolleson 9555 West Van Buren Street Tolleson, AZ, 85353	<b>Electronically to:</b> Mario Sandoval Executive Management Assistant Email: <a href="mailto:msandoval@tollesonaz.org">msandoval@tollesonaz.org</a> Subject: Tolleson Community Grant
---	---



To be completed by all recipients of funds from the City of Tolleson Council Community Grant Program within three months of completion of your project. Individuals must also present a final presentation to the City Council. In order to do so contact the Tolleson City Clerk’s Office to be added to the Council Agenda.

1. Name of applicant: \_\_\_\_\_
2. Name & location of project: \_\_\_\_\_
3. Date of project/activity: \_\_\_\_\_
5. Amount received from the Tolleson Community Grant Fund: \$\_\_\_\_\_

6. Please give details of how the money was spent.  
**Outline the costs of your project: supplies, airline tickets, printing, etc. (Where appropriate, please include written quotes). Use the following table to give details of funding sources used.**

Item	Funding Source	Amount (\$)
Total Cost of Project:		
Total Cost of Project Used From the Tolleson Community Grant Fund:		

7. Please provide written description, not to exceed one page, of the highlights of your project including number of participants, success and shortfalls, and lessons learned.

<p><b>Via mail:</b>                  Tolleson Community Grant Application                  C/O Public Affairs                  City of Tolleson                  9555 West Van Buren Street Tolleson,                  AZ, 85353</p>	<p><b>Electronically to:</b>                  Mario Sandoval                  Executive Management Assistant                  Email: msandoval@tollesonaz.org                  Subject: Tolleson Community Grant</p>
--	--

City of Tolleson Council Community Grant: Individual Application  
Deadline November 18, 2021 | 4:00 P.M.



FY 2021-2022