# The HOPE Foundation of Jo Daviess County REQUEST FOR GRANT GUIDELINES

**STEP 1: AVAILABLE GRANTS** 

STEP 2: DETERMINING ELIGIBILITY

STEP 3: PROCEDUE FOR SUBMITTING REQUESTS

**STEP 4: REVIEW PROCESS** 

#### STEP 1: AVAILABLE GRANTS

A. Dermine funding required within the limits set by the Hope Foundation of Jo Daviess County.

FOR INDIVIDUALS: Up to \$1,500 annually. Minimum Grant: \$100. FOR FAMILY SUPPORT: Up to \$1,500 annually. Minimum Grant: \$100. FOR AGENCIES: Up to \$2,500 annually. Minimum Grant: \$100.

B. Final grant amount will be determined on a case-by-case basis by the Hope Foundation of Jo Daviess County Grant/Gifting Committee. The fiscal year runs from July 1, to June 30.

#### STEP 2: DETERMINING ELIGIBILITY

- A. The Hope Foundation of Jo Daviess County is organized exclusively for charitable purposes to assist individuals with disabilities in Jo Daviess County deal with issues of health, housing, transportation, and/or employment. Consideration shall be based on one or more functional limitations in self-care, receptive and expressive language, learning, mobility, capacity for independent living, cognitive functioning and emotional adjustment.
- B. Requests should have a specific purpose/plan that:
  - 1. Clearly describes the anticipated outcome to improve the health and well being of the individual(s) with disabilities.
  - 2. Produces measureable results as described in a 90-day summary of results.
- C. Grants/gifts may be requested on behalf of individuals with disabilities by an individual, group of individuals or agency having a 501©3 tax status, following the procedures outlined below.
- D. <u>Immediate need funding</u> requests may be submitted directly to the Executive Director of the Hope Foundation of Jo Daviess County or the Grant/Gifiting Chair of the Hope Foundation of Jo Daviess County. <u>Immediate need funding</u> is defined as a request that requires immediate attention to meet a special need, such as, but not limited to clothing for a job interview, transportation for medical appointments, etc.
- E. Recipients may be required to match a portion of the amount granted.
- F. If a grant is made, a written summary and documentation of expenditures shall be submitted at the conclusion of the project. An audit may be requested.

## STEP 3: PROCEDURE FOR SUBMITTING REQUESTS

- A. An application must be completed for each grant request.
  - 1. Submit a request on the Hope Foundation of Jo Daviess County application form, typed or legibly printed. Forms may be requested by Mail from the Hope Foundation of Jo Daviess County, PO Box 262, Galena, IL 61036-0262 Office Phone # 815-238-2636.
  - 2. Clearly identify the individual or agency submitting the request.
  - 3. Clearly identify the beneficiary of the request and provide supporting documentation of their disability.
  - 4. Describe the benefits to be gained (be specific).
  - Include a detailed cost estimate. Attach substantiating documents (i.e. purchase proposal, estimated medical bills, estimated professional fees) as presented by the supplier of goods or services.
  - 6. Provide average monthly income and average monthly expenses.
  - 7. Describe other funding sources available for this purpose.
  - 8. Describe plans for future funding.
  - 9. Submit the application no less than 30 days before a regularly scheduled quarterly meeting of the Hope Foundation of Jo Daviess County Board of Trustees.
  - 10. Submit the application form and substantiating documents to:

Chair, Grant/Gifting Committee
The Hope Foundation of Jo Daviess County
PO box 262
Galena, IL 61036-0262

## STEP 4: REVIEW PROCESS

- A. A grant/gift request will be acknowledged within 30 days of receipt. The acknowledgement will indicate desposition of the request (i.e., decline, additional information needed, scheduled Committee/Trustee review).
- B. The Grant/Gifiting Committee may invite individuals requesting grants/gifts to meet with them as a whole or with individual members of the Committee.
- C. The Grant/Gifting Committee will review all requests received up to 30 days prior to a regularly scheduled meeting of the Hope Foundation of Jo Daviess County Board of Trustees.

- D. The Committee will present its recommendations at the next regularly scheduled meeting of the Hope Foundation of Jo Daviess County Board of Trustees.
- E. Applicants will be notified of approval/disapproval of a grant/gift within 30 days after a regularly scheduled meeting of the Hope Foundation of Jo Daviess County Board of Trustees.
- F. The Chair will ask the Foundation's Treasurer to draw checks for grants/gifts approved.

  The Chair will take steps to deliver the checks with an appropriate cover letter.
- G. In the case of Immediate Need Funding, the Grant/Gifting Chair, with the assistance of available committee members, will review and approve or disapprove a grant/gift as quickly as the request can be evaluated. The Committee Chair may determine that the request should be considered by the full committee. In most cases an interview of the recipient will not be necessary. If the request is approved, the Chair will ask that a check be drawn by the Foundation's Treasurer. The check and appropriate cover letter will be delivered to the recipient immediately. If the request is denied or passed on to the full committee, an appropriate letter of explanation will be send to the individual initiating the request.
- H. A grant must be claimed within six months of the approval date. After that time, the grant will be rescinded and the original check voided. If the applicant wishes to continue the process, a new grant application must be submitted.
- I. The Hope Foundation's Family Support Grant assists individuals with disabilities and families who are caring for a family member with a disability. It promotes family unity and provides limited temporary support by enabling people with disabilities and their families to meet current short term financial needs associated with health, housing, transportation, education and employment.

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