



Date: March 1, 2018
To: Nonprofit Organizations serving El Dorado County Seniors
From: Friends of Seniors
Regarding: 2018 Senior Program and Service Grants

Friends of Seniors will be awarding a total of up to \$10,000 in grants to El Dorado County non-profit service and local government organizations, as well as other groups conducting charitable work who align with the goals of the fund. Friends of Seniors, a fund under the El Dorado Community Foundation, is an organization supporting wellness, life enrichment, dignity and independence of El Dorado County Seniors and their caregivers through advocacy and financial assistance.

Please answer all questions, fill in the budget and send the completed application by mail or email to:

Friends of Seniors
P.O. Box 564
Placerville, CA 95667
info@friendsofEDCseniors.org

All applications are due by **5:00 pm, April 30, 2018**. Grant applicants will be notified of their grant's status by May 31, 2018.

If your organization received grant funding from Friends of Seniors in 2017, you are not eligible to apply again until 2019.

If your organization is selected to receive a grant, you will agree to provide Friends of Seniors with a report before June 1, 2019.

PLEASE NOTE – THERE IS NO NEED FOR A COVER SHEET

If you have any questions, please contact:
Kathi Lishman at (530) 626-6323 or info@friendsofEDCseniors.org.

FRIENDS OF SENIORS 2018 Grant Application

ORGANIZATION INFORMATION

Legal Name of Organization: _____

Executive Director: _____

Email address: _____

Name & email of grant applicant (if different) _____

Mission Statement: _____

Mailing address: _____

Number of FTE paid staff: _____ Number of part time staff: _____ Number of volunteers: _____

Names of current Board Members: _____

Geographic Area Served: _____

EIN #: _____ Year incorporated: _____

GRANT INFORMATION

Project Name: _____

Grant Purpose: _____

What is the need this project addresses? _____

Is this project:

New: _____

Existing: _____

Expansion of Existing: _____

Amount Requested: _____ Total Project Budget: _____

How many individual seniors will be served? _____

With what other organizations are you collaborating to address the need? _____

Please attach a document that answers the following questions in two pages or less:

1. Please provide data demonstrating the need exists in El Dorado County.
2. How will this project address the need?
3. What is the anticipated impact of the project?
4. How will you measure the results of the project?
5. What are the project timelines and major milestones?

Budget:

Organization Name:	
Grant Project Title:	
Funding Sources	Amount
Friends of Senior Grant Amount Requested	
Total revenue (add all funding sources listed above)	
Project expenses - You may be asked for verification of funds spent	
Total expense (add all expenses listed above)	