

# Community Assistance Grant Program

## 2020-2021

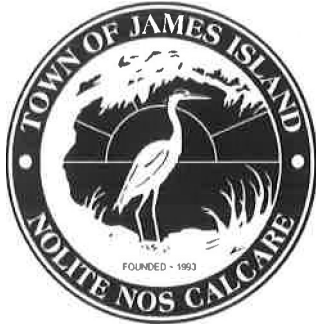
### APPLICATION GUIDELINES

Community Assistance Grants are awarded to non-profit organizations that provide beneficial services for the James Island community as a whole. These services generally cover the areas of education, health and human needs, community development, the environment or public safety. The Town has budgeted \$30,000 this fiscal year.

The Town is also accepting applications for community organizations that assists James Island by bringing tourism to our hospitality industry. The Town has budgeted \$20,000 for this fiscal year.

Applications must be received by Friday, October 2. Applicants are invited to attend the Thursday, October 15<sup>th</sup> Town Council meeting at 7:00 p.m. and present their requests to Council, Awards will be announced at the November 19 Town Council meeting.

For Questions contact: Frances Simmons, Town Clerk  
(843) 795-4141 or [fsimmons@jamesislandsc.us](mailto:fsimmons@jamesislandsc.us)



FY 2020/2021

# Town of James Island

## Community Assistance Grant Application

**\*Applications due by Friday, October 2 @ 5:00 p.m.**

Return applications to: Town of James Island  
Re: Community Assistance Grant Program  
P.O. Box 12240 James Island, SC 29412 (Hand-Deliver to  
1122 Dills Bluff Road, JI); or email to  
[fsimmons@jamesislandsc.us](mailto:fsimmons@jamesislandsc.us)

Amount you are requesting: \$

\*Typical awards are in the \$500 - \$2,000 range. Be mindful of limited funds when making your request.

### ORGANIZATION INFORMATION

Name of Organization:	
Contact Name and Title:	
Mailing Address:	
Street Address (if different)	
Phone Number:	
Fax Number:	
Email Address:	
How long has your organization been in existence?	

Please check the best description of your organization:

- Tax Exempt charitable organization (501 (c) 3     Government unit
- Other Tax-exempt (specify status)                       Federal     State     Local
- Church/Religious organization                               Unincorporated association
- Other (specify) \_\_\_\_\_

**Please attach a copy of your organization's IRS tax status determination letter (not applicable to government agencies or religious congregations). A tax-exempt identification number is not sufficient.**

Federal Employer Identification #:	
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FOCUS AREA: (check one)

- Arts     Community Development
- Education     Environment
- Health and Wellness     Public Safety
- Human Needs     Youth Development

Local Tourism

PROGRAM SERVICES (check one)

- Children     Families
- Youth     Senior Citizens
- Visitors to James Island
- Other (Specify) \_\_\_\_\_

Geographic area served:	
Percentage of service provided to the Citizens of the Town of James Island	
Percentage of services provided to visitors to the Town of James Island	

Applicant overall operating budget: \$ \_\_\_\_\_ Fiscal Year \_\_\_\_\_ to \_\_\_\_\_  
M/D/YY                                      M/D/YY

Please list the history of funding to your agency from the Town of James Island:

Fiscal Year

Amount

2018/2019  
2019/2020

\$
\$

GIVE A STATEMENT ABOUT YOUR ORGANIZATION AND YOUR SPECIFIC NEED FOR FUNDING:

I hereby certify that all funds that may be received by applicant organization from the Town of James Island will be solely used for the purposes set forth in this application and will comply with all laws and statutes.

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Signature of Chief Executive Officer or Executive Director

Date

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Name and Title (please print)

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Signature of Chief Financial Officer or Board Chairperson

Date

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Name and Title (please print)

Make sure your application includes the following: Your IRS Letter (if applicable), a list of officers, staff, and board members, and completed application with all required signatures.