



# 2026 COMMUNITY GRANT APPLICATION

Deadline: Monday June 1, 2026 at 11:59 PM

*Please download this application, enter the information requested, and save your work on your own computer. IMPORTANT: The Foundation website will not save your application. If you fill out this form partially or completely and do not save the document on your computer, you will lose your work. You may reformat this document on your own computer if you wish.*

| <b>Organization Information</b>   |  |
|---|--|
| Organization Name:  |  |
| Organization Address:   |  |
| Organization Phone:   |  |
| Contact Person:   |  |
| Contact Title:  |  |
| Contact Email:  |  |
| Name + email of person completing application if different from contact |  |
| Is this organization a 501(c)(3) nonprofit?                             |  |
| What is your organization's mission?                                    |  |
| If funds are awarded, how will the grant advance your mission?          |  |
| Title of project or request   |  |



# Capital Improvement or Durable Equipment Request

*Complete the following section to request funding for a capital improvement or for durable equipment that will be usable by your organization beyond the project period. Your organization may request improvement and/or durable equipment funding only, or you may request funding for both improvements/equipment and program expenses if they are part of the same project. All applicants need to provide the required attachments. (See list at the end of this application.)*

|   |  |
|---|--|
| Type of capital improvement or equipment  |  |
| Describe the equipment or improvement for which you are requesting funding and how it will be used to add or improve services to Colesville residents (100 word minimum). Add additional page(s) if needed. |  |
| What is the anticipated useful life of the equipment or improvement? (# years or months)  |  |
| Approximate date by when you plan to start using the improvement or equipment   |  |



|   |                                    |   |
|---|------------------------------------|---|
| <b>RELATED COSTS: Capital improvement or durable equipment</b>  | <b>Will this cost be incurred?</b> | <b>Included in budget you are submitting?</b> |
| Shipping  |                                    |   |
| Installation  |                                    |   |
| Training  |                                    |   |
| Routine maintenance   |                                    |   |
| If <i>not</i> included in the budget you are submitting with this request, how will these costs be funded? ( <i>if applicable</i> ) |                                    |   |
| <b><i>Total costs and projected sources of funds</i></b>  |                                    |   |
| <b>Category</b>   | <b>Source</b>                      | <b>Amount</b>                                 |
| Secured Sources:  |                                    |   |
| Pending Sources:  |                                    |   |
| Amount of this request:<br>( <i>Attach 3 price quotes or bids if applicable</i> )   |                                    |   |
| <b>TOTAL COST OF EQUIPMENT OR IMPROVEMENT</b>   |                                    |   |



## Program Request

*If you are requesting funding for a program that does not include capital improvements or durable equipment, you need to complete only the section below. If your program does include capital improvements or acquisition of durable equipment, fill out BOTH this section and the section above. All applicants need to provide the required attachments. (See list at the bottom of this application.)*

|   |
|---|
| Description of the program, project, or activity for which funding is requested (100 word minimum). Add additional page(s) if needed. |
|---|

|  |
|--|
| Does the program have a specific time requirement? If so, please describe: |
|--|

|                       |
|-----------------------|
| Program objective(s): |
|-----------------------|

|  |
|--|
| Total funds secured or to be secured from other sources: |
|--|

| Category   | Source | Amount |  |
|--|--------|--------|--|
| Secured Sources:   |        |        |  |
| Pending Sources:   |        |        |  |
| Amount requested from Colesville Rotary Community Foundation |        |        |  |
| <b>TOTAL BUDGET FOR PROGRAM, PROJECT, OR ACTIVITY</b>        |        |        |  |



|  |   |  |
|--|---|--|
| If awarded, what will Foundation funds be used for?                        |   |  |
| Project timing   | Start date (must be on or after 8/15/2026): | End date (must be on or before 8/14/2027): |
|  |   |  |
| Estimated number of people to be served                                    | Colesville residents:                       | Non residents:                             |
|  |   |  |
| Plans for continuing support of the program/project                        |   |  |
| Describe your evaluation plan. How will you measure results?               |   |  |
| Please identify the three top measurable outcomes you expect to accomplish |   |  |

## Required Attachments

Please include the following information on separate sheet(s) and attach to this application. Please ensure the name of your organization appears on each page you submit.

1. Cover letter with signature of person authorized to submit this application on behalf of your organization
2. Background: why this program is needed in the Town of Colesville and how individuals will benefit
3. Target audience: age group or income group, etc
4. Implementation details: who will organize and conduct the program? What are key milestones in the project timeline? How will the services or activities be promoted?
5. Total program budget, with itemized expenses and clearly indicating which expenses would be covered with Foundation funds
6. Overall organization budget for calendar or fiscal year 2026
7. List of the organization's Board of Directors or leadership, indicating officers



## Submission

This application may be reformatted on your own computer.

Hand delivered applications will not be accepted. Incomplete applications will not be considered.

Mailed application packets must be postmarked by 11:59 PM EDT on Monday, June 1, 2026 and sent to:

Colesville Rotary Community Foundation  
Attention: Grants Committee  
P. O. Box 152  
Harpursville, NY 13878

Emailed application packets must be sent to no later than 11:59 PM EDT on Monday, June 1, 2026 to [ColesvilleRotaryCommFoundation@gmail.com](mailto:ColesvilleRotaryCommFoundation@gmail.com).

Information about the Colesville Rotary Community Foundation and its grants program can be found on our website at [www.ColesvilleRotaryFoundation.org](http://www.ColesvilleRotaryFoundation.org).

Direct questions about your proposal to the Community Foundation at 607-828-9298 (leave a message) or via email at: [ColesvilleRotaryCommFoundation@gmail.com](mailto:ColesvilleRotaryCommFoundation@gmail.com). Allow up to two business days for one of our volunteers to respond.