

**CLAY COUNTY COMMUNITY FOUNDATION  
SIMPLE GRANT APPLICATION FORM**

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1) Applicant:

2) Project Title:

3) Contact Person Information: Name

Phone

Mailing Address

Email

4) Amount Requested:

5) List CCCF grants received in the last 5 years (Project title and grant amount):

6) Project Description: (See Need and Impact category in Guidelines):

7) Project Budget

A) Funds requested in this application:

B) Funds provided by others:

C) Funds provided by applicant:

D) Total cost of project:

8) Anticipated completion date of project:

The undersigned certifies that 1) they are authorized to represent the organization applying for a grant, 2) the information contained in the application is accurate, 3) the grant will be used only for the purpose outlined above, 4) a picture of the finished project may be displayed on the Foundation's website and, 5) the Applicant will publicly acknowledge the Foundation's grant.

\_\_\_\_\_  
Signature of Project Representative

\_\_\_\_\_  
(Print or type name and title)

\_\_\_\_\_  
Date

Email a copy of this completed form to [infocccf@gmail.com](mailto:infocccf@gmail.com) by midnight on January 15<sup>th</sup> **AND** submit one (1) paper copy, postmarked by January 15<sup>th</sup>, along with a current copy of the applicant's IRS Determination ruling letter, to: CCCF Administrative Office  
c/o Community Foundation of Greater Des Moines  
1915 Grand Avenue  
Des Moines, IA 50309

***If the deadline falls on a weekend or holiday, both electronic submission and postmark deadlines are the first working day after January 15<sup>th</sup>.***

***If you have questions, please send an email to [infocccf@gmail.com](mailto:infocccf@gmail.com)***