

# Asheville ABC Board Grant Application Cover Sheet

## ORGANIZATION INFORMATION

DATE: \_\_\_\_\_

Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Website address: \_\_\_\_\_

Contact Person and Title: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-Mail \_\_\_\_\_

Name & Title of CEO/Director (*if different from contact person*) \_\_\_\_\_

Brief Statement about Organization History and Mission:

## PROPOSAL INFORMATION

New Project: \_\_\_\_\_

On-going Project: \_\_\_\_\_

Grant Request Amount: \$ \_\_\_\_\_ Total Project Budget: \$ \_\_\_\_\_

Project Title: \_\_\_\_\_

Brief Summary of Project: (please use space provided)

Names of Collaborative Partners/Organizations:

Signature of CEO: \_\_\_\_\_ Date: \_\_\_\_\_

**INSTRUCTIONS:**

Please use the following outline to complete your proposal. Be thorough, but succinct in your responses.

**SECTION A: CASE FOR SUPPORT**

1. What need/problem specific to the "treatment of alcoholism or substance abuse, or research or education on alcohol or substance abuse" will this project address?
2. How will the need/problem be addressed through this project?
3. What population is this project designed to serve?
4. Why and how is this target population at risk to alcohol or substance abuse?
5. How will the identified target population benefit from this project?
6. What is the strategy to reach this target population?
7. What other organizations will be involved in this project?

**SECTION B: PROJECT IMPLEMENTATION/MANAGEMENT**

1. Provide a timeline to demonstrate how this project will be implemented. The timeline should include specific steps, key staff and volunteer involvement as well as collaborative partner involvement in each step.
2. Provide names and qualifications of key staff/volunteers and collaborative partners

**SECTION C: EVALUATION**

What methods will you use to evaluate the project's impact on alcoholism and substance abuse and how will the impact be measured? Answer this question using the following outline:

1. Goals (What changes do you seek to create?)
2. Strategies to achieve goals (What will be done to facilitate change?)
3. Measurements of success (How will you define success?)
4. Measurement tools (What methods will be used to track and measure progress toward goals?)

**SECTION D: BUDGET**

It is important that you provide a line-item budget accompanied by a budget narrative.

**SECTION E: PROJECT SUSTAINABILITY**

1. If this is an ongoing project, how will the organization support this project in the future if it is to continue?
2. What additional resources are needed to support this project and what your plans are for procuring them?

**SECTION F: REQUIRED SUPPORTING DOCUMENTS**

- 1-Organization's previous and current annual budget/ Audited financial statement within the last two years.
- 2- A copy of the original IRS determination letter indicating 501 (c) (3) tax-exempt status.
- 3- Current Board of Directors Include occupation and/or community affiliations, and board responsibilities)
- 4- Letters of support (maximum of three)

5- Copy of most recent Form 990 (Return of Organization Exempt from Income Tax) filed with the Internal Revenue Service,

**REMINDER: APPLICATION DEADLINE IS THE LAST FRIDAY IN MAY Applications SHOULD BE MAILED TO:**

**Asheville ABC Board, 1 Cherry Street North, Asheville, N.C. 28801**

**Applications are to include one (1) original and six (6) copies. Include attachments with the original application only.**