

Asheville ABC Board Grant Application Cover Sheet

ORGANIZATION INFORMATION

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? Be specific regarding racial, ethnic or minority population(s) served.
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

(See attached budget form). 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 are your plans 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, 24 Old Brevard Road, Asheville, N.C. 28806

Applications are to include one (1) original and six (3) copies. Include attachments with the original application only.

Questions? Please contact: Debbie Bradley, (828) 251-6192

