

COVID-19 Relief Fund Phase 2

Community Foundation for Monterey County

Grant Request

The Community Foundation for Monterey County (CFMC) and Monterey Peninsula Foundation established the COVID-19 Relief Fund in March 2020 to help those affected by the impact of the Coronavirus in Monterey County. The **COVID-19 Relief Fund** will address the immediate and longer-term needs of our region's most vulnerable residents who will be impacted by the Coronavirus.

In 2020, government officials and business took sweeping measures to halt the spread of the virus by closing schools, delaying travel, cancelling events and having people work remotely. These challenges disrupted our lives physically, socially and economically. We remain concerned about community health, and the continuing need of working families facing economic hardship and food insecurity.

Criteria for Grant Requests

The CFMC will consider grant requests to:

- Assist nonprofits serving vulnerable populations with basic needs (food, housing, living expenses, transportation costs, direct support, etc.) related to job layoffs and/or financial need.
- Assist nonprofit organizations with program support and related impacts due to quarantines and physical distancing,
- Fund programming to address the related-mental health impact.
- Assist nonprofit organizations with support for proactive COVID-19 recovery, including education and vaccination efforts.

Grants are expected to range between **\$5,000 to \$30,000** and will be reviewed on a rolling basis. 501(c)3 nonprofit organizations and public agencies are eligible to apply for additional funds as needs arise. Requests will be reviewed by CFMC staff and grants awarded as quickly as possible.

Program Name*

Provide a brief one-line phrase to describe this request. This phrase serves as the title of your request for our records.

Character Limit: 250

What zip code represents the majority of people to be served by this grant?*

Only enter one five-digit zip code – while a grant may serve Monterey County residents in multiple zip codes, we ask for the zip code that represents the majority of people the grant will serve.

Requested Amount*

Character Limit: 20

Briefly describe your situation as it relates to COVID-19.*

How has the pandemic affected your daily operations?

Character Limit: 2000

Please describe your request. Include how grant funds would be used.*

Please include number of people served, demographics (age, ethnicity, etc.) and geographic area with a descriptions and duration of services.

Character Limit: 3000

Itemized Budget

If available, upload a spreadsheet or other document with the detailed budget information. Alternatively, a list of how the funds would be used can be provided below.

Character Limit: 2000 | File Size Limit: 3 MB

Organization Agreement

We, the undersigned, certify that the practices of this organization conform to the non-discrimination policy as follows. This organization does not discriminate in its employment practices, volunteer opportunities or delivery of programs on the basis of race, religion, gender, national origin, age, disability, veteran status, marital status, sexual orientation, or any other characteristic protected by law.

We, the undersigned, hereby state that the information presented in this application is complete and factual. By typing our names below and submitting this application, we confirm our authority and have notified and secured approval from all parties. We hereby agree that funds, if granted, will be used only for the purpose described above unless written approval from the Community Foundation for Monterey County is received.

GRANT AGREEMENT

A grant from the Community Foundation for Monterey County (CFMC) is to be used only for the purposes described herein and is subject to the grantee's acceptance of the conditions specified below. Reviewing the grant agreement now will expedite payment IF a grant is

approved.

Grant Period: Up to 11 months

Purpose and Use of Funds: Grant funds must be spent within **11** months of the grant date and for the purposes stated in the grant proposal and specified above. Grant funds may not be used for any expenses incurred prior to the grant date. If something unexpected occurs or additional time to complete the funded activities is needed, you may request an extension or budget modification by email. No changes may be made in timing or budgetary use of the grant funds without the CFMC's advance written approval.

Required Reports: No final report is required

Email correspondence is used through our online grants manager. It is your responsibility to keep your online account and contact information current by informing us of any changes. More information is available in the Overview Guide to using our online grants system at www.cfmco.org/apply.

Public Information: The CFMC encourages grantees to make announcements of grants upon receipt of the grant payment. The CFMC communications department is available to provide assistance in your communication efforts. We also welcome your photos reflecting the services made possible by the grant.

Do you understand and agree to the terms and requirements of this grant?

If you have any questions, contact your program officer or the appropriate staff contact immediately, 831.375.9712 or 754.5880, www.cfmco.org/nonprofits/grants/community-impact/contact-us/*

Choices

Yes

Name of Authorized Board Member*

Character Limit: 100

Name of Executive Director or Other Authorized Representative*

(Second person, different than above)

Character Limit: 100

Use this space for any optional comments or explanations regarding this grant application.

Character Limit: 2000