

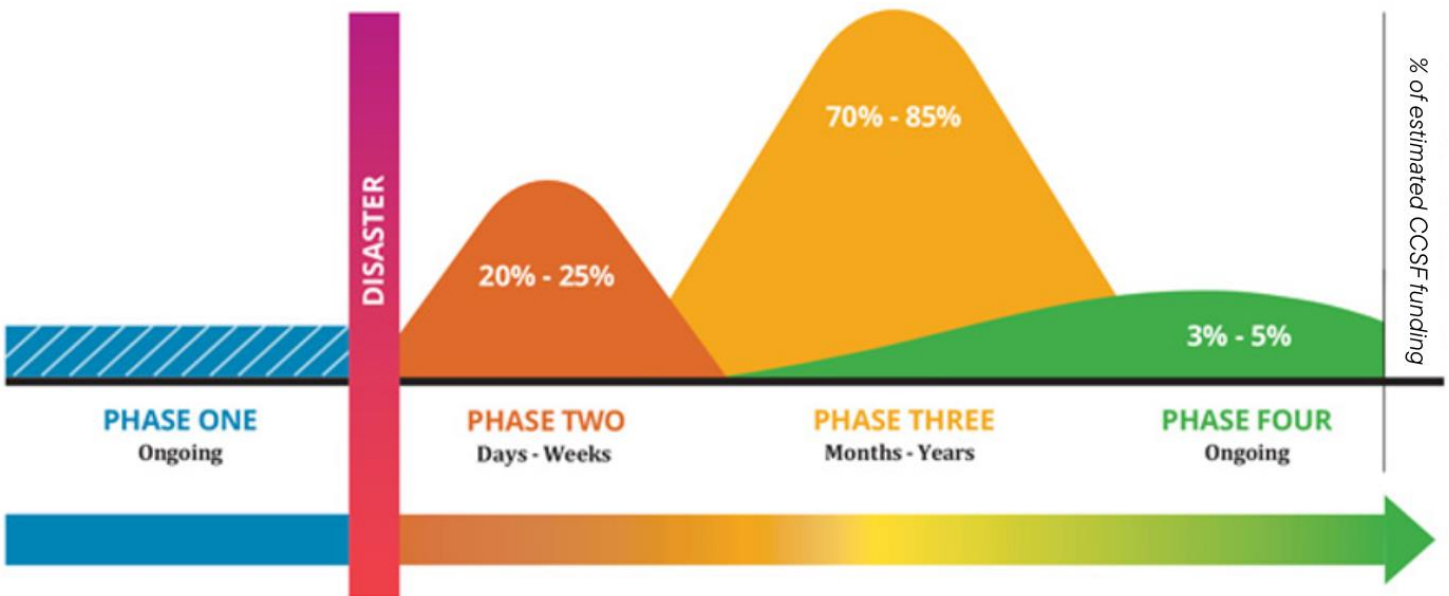


APPROACH TO DISASTER RESPONSE

The Community Foundation for Crawford County adopted this four-phase approach to disaster response, inspired by the The Community Foundation of St. Clair County in Michigan, as well as the 2023 disaster in Maui and the incredible response from their philanthropic community.

To qualify for support from this fund, disasters must be declared by the county, state, or federal governments or the Community Foundation (at the direction of the Crawford County EMA), unless it's for Risk Reduction and Disaster Readiness.

This approach acknowledges both the immediate and long-term recovery needs for the people and places affected by disaster events.



PHASE ONE Risk Reduction and Disaster Readiness

To respond quickly to a disaster, the CC Strong Fund is available with existing funding, to allow grants to be deployed quickly, and with flexibility for high-impact results, as needed by the impacted community.

PHASE TWO Rapid Relief and Response

In Phase Two, CC Strong Fund grants focus on meeting the immediate needs of the community. Awards are made to partners that provide rapid response, including the distribution of supplies and execution of services, such as medical care, shelter, and food, as well as grief support and trauma-informed care, to provide relief to impacted communities.

PHASE THREE Recovery and Stabilization

In Phase Three, funds are granted for longer-range recovery and stabilization efforts, including interventions and programs designed to strengthen the health of our economy and communities while supporting community organizations engaging with families; efficiently connecting communities impacted to the solution building to meet their needs.

PHASE FOUR Rebuilding Resilience

In Phase Four, the CC Strong Fund grants support the rebuilding of resilience and the creation of preventative strategies that includes engagement with communities and convening members and leaders across sectors. Ongoing work will focus on increasing social equity among the impacted people and places of Crawford County, over a broad range of metrics including housing security, health and wellness, and generational economic progress.



GRANT APPLICATION

Have questions about the application or what we're looking for? Our program team would love to chat with you about how to make the most out of your application. Call (419)562-3958 or email info@cfcrawford.org

Name of Organization: _____ Date: _____

Executive Director: _____

Contact Person: _____

Tax ID: _____ Address: _____

City/State/Zip: _____

Phone #: _____ Email: _____

Project/Program Name: _____

Areas of Disaster Approach (check all that apply):

☐

Risk Reduction and Disaster Readiness

☐

Recovery and Stabilization

☐

Rapid Relief and Response

☐

Rebuilding Resistance

Purpose of Grant (one paragraph):

Geographic Area Served: _____ Estimate of Individuals Impacted _____

Total Project Cost: _____ Amount Requested: _____

Signature of Org Representative: _____ Date: _____

Name and Title of Applicant: _____ Date: _____

Signature of Applicant: _____ Date: _____



Section 1: Organization and Program/Project

Briefly tell us about your organization's mission/programming specifically as it relates to this request:

Tell us more about your request:

How does this request address the impact of the disaster? Who will it affect and how? Why are you the best organization to address the need? Describe any work you've already done to respond to the disaster. Be concise- think elevator pitch, not term paper.

How will you proceed if you do not receive funding from the Community Foundation?



Section 2: Program/Project Budget

2A Time period this budget covers: _____

2B Total Cost of Project: _____ **2C** Amount Requested: _____

2D Description of various budget categories (for a large financial request, make up your own more detailed form. (e.g. separate salaries, taxes, fringes, or supplies, printing & copying.) In most cases, Revenues will equal Expenses, if they are not equal include an explanation below.

Revenues:	Committed:	Pending:
Grants:	\$ _____	\$ _____
Donations:	\$ _____	\$ _____
Organization Contribution:	\$ _____	\$ _____
In-kind support:	\$ _____	\$ _____
Event Revenue	\$ _____	\$ _____
Other	\$ _____	\$ _____

This grant request: \$ _____

Totals for committed and pending: \$ _____

TOTAL REVENUES (committed + pending =) \$ _____

Expenses:

Salaries, payroll taxes, fringe benefits	\$ _____
Consultants and professional fees	\$ _____
Insurance	\$ _____
Equipment	\$ _____
Supplies	\$ _____
Rent, utilities, maintenance	\$ _____
Evaluation	\$ _____
Marketing	\$ _____
Other	\$ _____

TOTAL EXPENSES \$ _____

If Revenues do not equal Expenses please provide explanation. What is your plan to make up the difference?

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Section 3: Organization Background

3A Organization's fiscal year: _____

3B Attach a copy of:

- 1.) Current IRS tax exempt status letter
- 2.) Most recent financial statements
- 3.) A copy of organization's current Annual Operating Budget. If revenues do not equal expenses please provide explanation.

3C Names, affiliations, and terms of office for Officers and Directors, organizational chart.
(if available)

3D Additional information helpful in knowing about your organization.