# Sample Community Grant Application (Program/Project)

Please review the grant guidelines and the information on the specific focus areas on our website. If you have never applied for a WCF grant, please contact our office to discuss your eligibility: 757-259-1660 or office@williamsburgcommunityfoundation.org.

Organizations in James City County, York County, or the City of Williamsburg are eligible to apply. Organizations outside of the service area may apply for grants only if the programs funded serve Williamsburg, James City County, or York County residents.

You may use this application to apply for these grants:

**Community Endowment** 

Benjamin R. Altshuler Memorial Fund - Transportation

Genevieve McGiffert Fund for the Musical Performing Arts (available in 2026)

An Occasion for the Arts Fund

Mary Turnbull Bike & Walk Fund (available in 2026)

#### General Information

(Asterisk\* = required field)

Executive Director/CEO Name\*

Executive Director/CEO Email\*

Organization Information AKA: Does your organization have another name or acronym by which it is commonly known?

Website

Organization Mission & Vision\*

#### **Grant Primary Contact Information**

First Name\*

Last Name\*

Title\*

Email Address\*

**Direct Phone** 

Is this your organization's first time applying to the Foundation? \* YES/NO

If this is your first time applying, please contact WCF before you apply: 757-259-1660 or email office@williamsburgcommunityfoundation.org.

program the past a the organ area. If yo competit	Type (select one). Any applicant may request support for a particular or project. Organizations that have received competitive grants from WCF in are now eligible to apply for general operating support, which may be used at nization's discretion to support their overall mission and activities in our service ou are unsure of whether or not your organization has received a cive grant from WCF, please call us at 757-259-1660.*  am or Project X General Operating Support	
Page 2	Request Summary	
Title: please provide a short grant title for this request.*		
Please provide a short summary of your request for publicity purposes (3-5 sentences max.)*		
Geography: Please select all the areas your organization serves.*		
□ Ja □ Yo □ St	ity of Williamsburg mes City County ork County catewide ther (describe)	
Priority Area: Please select the WCF funding priority area that best fits your grant request.*		
<ul> <li>□ Ca</li> <li>□ Cl</li> <li>□ Ec</li> <li>□ Ha</li> <li>□ So</li> </ul>	rts & Culture apacity Building hildren & Young Adults conomic Mobility nvironment & Conservation ealth cholarship enior Services	

Does this grant request include costs related to visual arts programs such as arts education, arts enrichment, arts competitions, public art, arts exhibits and cultural events? Please select "yes" in order to be considered for funding from An Occasion for the Arts Fund.\* Yes/ No

Does this grant request include costs related to transportation, especially for low-income people, or those without access to a car? This could be any program that makes transportation accessible and affordable enabling all residents of the area to participate in community life. Please select "yes" in order to be considered for funding from the Benjamin R. Altshuler Memorial Fund. (Limit 3 years funding).\* Yes /No

Request Amount (max. \$5,000). Please enter numbers only - no dollar signs.\*

Total Annual Operating Budget. Please enter numbers only - no dollar signs.\*

Is the applicant organization audited annually by an independent certified public accountant? Note: an audit is not a requirement for grant consideration. Yes No

Would you like WCF to share the proposal summary with donors who have an interest in learning more about local nonprofit needs?\* Yes/No

## Page 3 Organization Overview & Impact

Organization Overview. Please briefly describe the strategic goals of your organization. What specific community needs does your organization address in our service area and how does your organization address them?\*

How does your organization measure its effectiveness and impact? Describe the accomplishments of your organization in the past year. Please share any relevant data on the people you served last year (any demographics you track such as locality, age, income, etc.)\*

Please provide the number of full-time, part-time, and volunteer staff at your organization.\*

If another organization is serving as your fiscal agent for this grant request, please attach a letter of agreement or other evidence of your partnership (PDF files only.)

Collaboration: List your partners in the project and their roles (if applicable). If there are no partners, please explain why.\*

How does your organization address barriers to inclusion for people who could benefit from your program? This could be accessibility, affordability, language, health-related barriers, cultural differences, educational level, etc.\*

#### Page 5 Financial & Board Information

Please upload your attachments below. Make sure all of your PDF files are formatted correctly so that all of the required information is visible.

Please attach your organization's annual budget vs. actual report for the most recently completed fiscal year. This should include income and expenses.\*

Please upload your organization's budget for the current fiscal year.\*

Please attach your Board Member List (PDF format). If the organization is part of a government entity, please include the list of an appropriate advisory board. \*

Please attach any additional information that is needed for this application (limit one file). This may be a photo, brochure, or supporting letter, etc. Please refrain from submitting lengthy documents. Must be in PDF format.

What is your fiscal year? (Example: July 1 - June 30)\*

Please describe your major sources of funding.\*

We are aware that many organizations and people they serve may be impacted by changes in government funding. If your organization or those you serve may be negatively impacted, please explain.\*

## Page 6 WCF Grant Conditions

- A staff member or volunteer committee member may contact you following the submission of this application form to request clarification on the request and budget.
- The Foundation may also request a site visit and/or a ticket to an event that it funds so that Foundation volunteers may review the activities supported.
- WCF will not fund organizations that discriminate on the basis of race, religion, age, sex, gender identity, sexual orientation or national origin.
- If funding is received, the Williamsburg Community Foundation's support will be publicized by the recipient.
- WCF will be included on donor lists and recognition.
- The organization must submit a Final Report within one year of receiving the grant.
- Organizations with outstanding (overdue) Final Reports will not be eligible for future funding until the report is received.

By checking the box below, you agree to abide by the conditions l	isted above.*
□ Yes I agree.	

Questions? Contact Us. Contact: Phone: 757-259-1660 Email: office@williamsburgcommunityfoundation.or