

Community Organization Grant Request Form

See attached for the current Policy & Procedures for Grants to Community Organizations

Form #9

Today's Date: (MM/DD/YY) 10 /16 /18

Contact mornation					
Organization Name: Erie UpLink					
Organization Address: PO Box 1424	_{City:} Erie	State: CO Zip: 80516			
Contact Person: Stephanie Short, Lexi Cire, Lisa Knudser	erieupl	ink@gmail.com			
Daytime Phone: 303-709-5689 (Lisa Knudsen)	Cell: 303-709-5689 (Lis	sa Knudsen)			
Organization Address: PO Box 1424 Contact Person: Stephanie Short, Lexi Cire, Lisa Knudser Daytime Phone: 303-709-5689 (Lisa Knudsen) Organization Structure (Ex. non-profit corporation): non-profit corporation):	corporation 501(c)(3) _{Ta}	x Exempt # 45-2261184			
Request Information					
Requesting: Town Sponsored Event - Requesting Financial Assist	ance Town Endorsed Eve	ent - Requesting In-Kind Assistance			
Description of Request:					
Erie UpLink has expanded it's operations significantly to a new 1,200 student body school. Our operating budge outgrew our free storage space. A grant of \$5,000 from and fulfill our mission of serving Erie families in need. and summer lunch programs and additional scholarshi	et has nearly doubled from n the Town of Erie would a The grant would cover su	\$15,092 in 2017 as we Illow us to continue to grow Oplies for our Tiger Packs			
Date When Funds Are Needed: ongoing					
Event Information					
Description of Event (attach additional information if needed): We are not requesting funding for a specific event, rather we are requesting support for our ongoing program needs as we expand to serve a growing Erie population. Please see the attached Power Point outlining our mission and programs.					
Date(s) of Event: ongoing					
77 Erie Village Square, Erie Public Schools (S'	VVSD) Duration of Event: OI	ngoing			
Estimated Attendance: n/a					
How will this event positively effect the community members and the Erie UpLink provided 120 families with Tiger Packs an Scholarships, 660 community volunteers assisted with through our Summer Lunch Program. The number of E	nually, 6 students with Col	meals were served			
Please note this is only a request form. All requests should be submitted consideration in accordance with the annual budget schedule, and will "out-of-cycle" should be submitted to the Town Clerk who will forward to t	be considered collectively at a Board	Meeting. Any requests submitted			

Date Received

Date Reviewed

Date Approved



Internal Review Community Organization Grant Request Form

Eligibility Criteria						
	0	Non-Profit Corporation Service Organization Public School	0	Community Service For Profit Business		
Award Criteria						
0000 00 0 0000	 □ Celebration of the Town's culture, or heritage □ Observance of local, regional, or national historic dates or events □ Contribution to the general public good in areas of education, safety, health, welfare, or recreational activities □ Expected number of people who will participate or benefit from the program, event, or activity □ Consistency of the applicant's, customers and promotional goals with the Town's character, values and service priorities □ The applicant's historical participation and association with community projects, events and continued willingness to participate □ Community support for, or opposition to, the proposed project □ The operating and maintenance costs associated with the proposed project □ Anticipated public perception of the association of the Town and the proposed project 					
Dep	artmer	nt Reviews				
	Town Clerk:					
	Admi	nistration:				
	Finance:					
	Parks & Recreation:					
	Police:					
	PublicWorks:					
Board of Trustees						
	Appr	oval Date:				
	Notes:					
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