

Updates2026 Grants to Communities Application

The Grants to Communities Program Application is a uniform process by which community organizations may apply to the Town for financial support of projects, programs, and events. This application assumes an annual cycle to allow for appropriate budgeting and planning.

Eligibility:

Eligibility is restricted to applicants which are:

- Recognized community service organizations organized and federally designated for tax purposes as non-profit corporations (501c3)
- Chartered chapters of state or national lodges or service organizations that engage in charitable or community service activities
- Public schools located in Erie (both BVSD and SVVSD)

Type of Grants:

Two categories of grants are funded on an annual basis:

- Events
- Health and Human Services Programs

Applications:

Grant requests must be completed via the on-line application available **September 1 through November 30** each year. All requests will be processed and reviewed by the Grants to Communities Committee, which will submit a recommendation to the Town Council for final approval.

Grant recipients will be notified by January 30 of their award and any reporting requirements.

Award Criteria

All applications will be reviewed based on how well the proposal benefits the Town's residents and how well it reflects the values set forth in the preamble of the [Home Rule Charter](#) including:

- Supporting sustainability and preservation of our natural environment
- Encouraging the principles of democracy, equity, and justice
- Fostering a community that is inclusive, diverse, and welcoming to all
- Promoting economic growth and opportunity
- Bettering the community and well-being of Erie residents

In addition, the following will be taken into consideration:

- Past performance
- Impact on the community
- History of the event/service in the town
- Expected number of people who will participate or benefit from the program, event, or activity
- Consistency of the applicant's goals with the Town's values, and service priorities
- The applicant's past participation in community projects, events, and continued willingness to participate
- The operating and maintenance costs associated with the proposed project

Award Limitations

Service grants are capped at \$12,000.

Event applications are capped at \$5,000 but may include more than one event.
Organizations may apply for up to two event grants.

All money must be spent prior to October 31 of the year in which it is received.

Organization Name:

Address:

City:

Zip Code:

Organization's Website:

Organization type:

- ☐ Community service Organization (501c3)
- ☐ Chapter of state or national lodges or service organizations
- ☐ Public school in Erie

Upload 501c3 documentation:

Name of Contact Person:

Contact Email:

Contact Phone:

Organization Description:

Does your organization have a board of directors: Yes/No

If yes, upload list of board of directors
Describe how board members are compensated

Does your organization utilize help from volunteers?
Describe how volunteers would be used for the event or service for which you are requesting funding.

What other funding sources do you have:

| Source of Funding | Estimated Funding Amount | Percent of Total |
|-------------------|--------------------------|------------------|
| | | |
| | | |
| | | |
| | | |
| | | |

For which type of grant are you applying?

- ☐ Event
☐ Health and Human Service Program

| EVENT | SERVICE |
|---|---|
| Name of Event | Name of Service |
| Event Date | Date(s) of Service |
| Event Location | Service Location |
| Estimated Event Attendance | Estimated number of Erie residents impacted by the service |
| Description of Event | Amount of funding requested |
| Amount of funding requested | |
| Please describe how the requested funds will be used - be specific. | Please describe how the requested funds will be used - be specific. |
| How will this event positively impact community members and the Town of Erie? | Is this a new or existing program or service? |

Please indicate the number of times this event has been held, provide attendance numbers (N/A if new event)

Please describe past events
Please describe how the requested funds will be used - be specific.

Please explain community impact of this event

How will your event be impacted if the requested funding is not received.

Is there any additional information you would like the review committee to consider?

Describe the services your organization will provide and how do you identify this need? Please provide specific examples.

Please identify other organizations providing similar services to the target population you serve (if any).

How long will the requested funding support the services described above?

Who will benefit from these services – both directly and indirectly?

What are your desired outcomes and how will you measure success?

How will the services you offer be impacted if the requested funding is not received?

Is there any additional information you would like the review committee to consider?

Upload the following documentation:

- 501c3 documentation
- List of board members (if applicable)
- IRS W-9 form
- Additional information you would like to be considered

Acknowledgements

In applying for this grant I acknowledge:

- ☐ All information in this application is public information and may be released under the Colorado Open Records Act.
- ☐ All funding awarded must be used for the event/service described in this application.
- ☐ Failure to submit the end-of-year financial report and required documentation will make this organization ineligible for a grant in 2027.

Specific to EVENT grants:

- ☐ The Town of Erie's sponsorship must be noted on all publicity and media materials.
- ☐ All required event permitting must be approved prior to funding being released.
- ☐ A Certificate of Insurance listing the Town of Erie as an additional insured party must be provided no later than two weeks prior to the event.

Certification and signature:

I certify the information in this application is true and complete. I understand false statements, misrepresentations, or omissions of information in this application may result in rejection of this application. The Town is expressly authorized to investigate all statements contained in this application.

- ☐ By checking this box, I am confirming my typed name is my legal name and serves as my electronic signature and that I am authorized to sign this application on behalf of the requesting organization.

Signature

Date