The RCF COVID-19 Community Crisis fund is a rolling emergency grant that will help nonprofit organizations to be responsive to the ever-changing challenges within Rockland. Preference will be given to established nonprofits that are well suited to provide immediate assistance to those that are disproportionately affected by the Coronavirus.

**Eligibility**

The following are eligible to apply for grants:

1. Tax exempt/non-profit organizations located in Rockland County, New York
2. Tax exempt/non-profit organizations providing services to residents of Rockland County, New York that are directly linked to mitigating emerging issues caused by the Coronavirus. These services may (but are not limited to include the following:
   - Programs that safely bring meals to Rockland County residents who are at highest risk from the virus
   - Programs that provide transportation for medical supplies, food and the like
   - Programs that are reliant on increased volunteer engagement
   - Programs that provide interim counseling or educational related services remotely

*Note: An organization may receive only one grant every twelve (12) months. All organizations must be able to document the number of residents being served in Rockland County.*

Please note: This grant may not support:

- Debt reduction
- Underwriting of special events
- Fundraising campaigns, such as endowment, capital or annual campaigns that do not reflect immediate need
- Projects related to partisan politics or elections
- Schools, however grants may be made to support student/teacher community service programs to assist community needs at schools during this crisis
- Religious organizations, however grants may be made to support non-religious programs provided through these institutions
Awards
Grants made through this program will be determined by the RCF Scholarship & Grant Committee, with the assistance of several ad-hoc committee members. Every effort will be made to expedite applications. Please keep a copy of your application and any supplied attachments for your records.

Questions
Please call 845-947-2868 or info@rocklandgives.org

Review Criteria
Each application will be reviewed on the following criteria:

- **Organization**: Does the organization meet the eligibility criteria? Is their purpose/mission clear and concise? Does the organization exhibit a capacity to utilize the grant effectively? What is the organization’s grant history with the Community Foundation (number of grants applied for/awarded, past grant paperwork up-to-date, effectiveness, etc.)?
- **Program/Project Request**: How well does the request improve the capacity of the organization and improve its ability to serve their target population during this pandemic?
- **Funding**: Is the funding request clear and focused on the program/project described?
- **Viability of Other Funding**: If additional funding is needed to pursue the program/project/equipment or if only partial funding is granted, specifically how will program/project/equipment be funded?
- **Quality of Application**: Is the grant clear and concise? Were the application guidelines followed? Are the requested documents provided and well prepared?

Review Process
All applications will be rated on these criteria and reviewed by the Scholarship & Grant Committee of the fund to which you are applying. This committee is comprised of community members and RCF Board of Directors representing all areas of Rockland County. All recommendations are reviewed, approved or declined by the Board of Directors of the Rockland Community Foundation.
The Rockland Community Foundation COVID-19 Community Crisis Grant Application

**ORGANIZATION INFORMATION**

*Please type or print clearly*

<table>
<thead>
<tr>
<th>Applicant/ Organization Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mailing Address</td>
</tr>
<tr>
<td>City</td>
</tr>
<tr>
<td>Telephone</td>
</tr>
<tr>
<td>Website</td>
</tr>
<tr>
<td>Executive Director</td>
</tr>
<tr>
<td>Contact Name (if different)</td>
</tr>
<tr>
<td>Title</td>
</tr>
</tbody>
</table>

**TAX STATUS – FOR ORGANIZATIONS**

*(Please complete and attach a copy of your organization’s IRS determination letter.)*

<table>
<thead>
<tr>
<th>Tax Status (choose one)</th>
<th>501(c)(3) Faith-based Institution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other (explain)</td>
<td></td>
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<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Not a nonprofit organization, per IRS; we have a fiscal sponsor.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Sponsoring Organization*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tax ID #</td>
</tr>
</tbody>
</table>

*Please submit a letter from Sponsoring Organization stipulating they have agreed to serve in this capacity. Please also submit a copy of the Sponsoring Organization’s tax determination letter.*
<table>
<thead>
<tr>
<th>ORGANIZATION’S MISSION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Include a brief statement of organization’s objectives and/or activities. You may attach a separate sheet and include a brochure, pamphlet or similar materials.</td>
</tr>
</tbody>
</table>

| Organization annual operating budget: | $ __________________________ |
| Organization Audited? | No | Yes | date |

<table>
<thead>
<tr>
<th>SUMMARY OF REQUEST</th>
</tr>
</thead>
</table>

| Amount requested from The Rockland Community Foundation: | $ |

<table>
<thead>
<tr>
<th>COLLABORATIONS AND OTHER SUPPORT</th>
</tr>
</thead>
</table>
| Please tell us if you are collaborating with any other organizations.  
(Include name of the organization(s) and amount of support requested and/or expected.) |

<table>
<thead>
<tr>
<th>Funding Alternatives</th>
</tr>
</thead>
<tbody>
<tr>
<td>(How will you fund this request if partial or no funding is granted?)</td>
</tr>
</tbody>
</table>
PROJECT/PROGRAM SUMMARY  (You may submit a separate typed proposal.)

Please provide a detailed description on how this grant will address emerging issues related to the Coronavirus and how it will help serve those populations most at risk.
(Describe i.e. staff, equipment, training or program, materials, fees, etc.)

Who will this project/program serve?
(Indicate special populations, geographic area, community focus, organizational focus, etc.)

COMMENTS

Is there any other information we might need to better understand your request and/or the unique needs of the community that this request will serve?
REQUIRED ATTACHMENTS*

❑ IRS tax determination letter
❑ Current board list including professional affiliations
❑ Current year operating budget
❑ Most recent financial audit (if available)
❑ Organization statement of non-discrimination

*For applicants utilizing a fiscal agent, the fiscal agent must submit all the required attachments. The applicant should also submit all available attachments.

Signature

Date

Print Name

Title

ONLY COMPLETED APPLICATIONS WITH ALL REQUIRED ATTACHMENTS WILL BE CONSIDERED

You may submit your application by email to info@rocklandgives.org
Please scan all required attachments in pdf format, or you may submit your completed application by mail to:

The Rockland Community Foundation
COVID-19 Community Crisis Grant
P.O. Box 323
New City, NY 10956

The Rockland Community Foundation can be of assistance to you as you prepare your grant application, please feel free to contact:

845-947-2868 or email info@rocklandgives.org

Applications will be reviewed upon receipt.
We will make every effort to expedite all applications.

Administrative use only

Date Received ______________ Approved __________________________ Notice sent ______________

Check # ____________________ Date __________________________ Amount $ ______________

Comments: __________________________________________________________________________