

Tupelo Quality of Life GRANT APPLICATION

The mission of the **Quality of Life Committee** is to help support activities, projects, and programs that add to the BEAUTIFICATION, FITNESS, and ENTERTAINMENT value of Tupelo making it an enjoyable place to live as well as an attractive destination to visitors.

Application requirements –All applications must meet the following guidelines to be considered for funding.

- 1) The event, activity, or project being applied for must be at little or no cost to participants and be inclusive to all demographics.
- 2) Applications must be turned in no earlier than 90 days and no later than 60 days before the date of the event being applied for.
- 3) Those receiving CVB matching fund grants are not eligible to receive a Quality of Life grant as QOL is funded through the CVB.

Please select the following category for your project or event:

Fitness

Beautification

Entertainment

Contact Name & Title:	
Organization Name:	
Address:	
City:	
State:	
Zip Code:	
Phone:	
Fax:	
E-mail address:	
Website address:	

1. **Organization Information:** (Please include a brief history of the organization, its current focus, current programs, and recent accomplishments.)

2. **Current Financial Information:** (Please include a copy of the latest verification of tax-exempt status from the Internal Revenue Service and certified audit for the previous three years [if a young agency, include last year's financial statement and the most recently filed IRS Form 990].)

3. **Market and Customers:** (Please include current population served including gender, age, and geographic location.)

4. **Description of the Proposed Program:** (Please include a statement of increasing the quality of life in Tupelo and a description of how it will address that need.)
5. **Key Individuals:** (Please provide a list of names and qualifications of key staff involved with the proposed project.)
6. **Specific Dollar Amount Requested from the Foundation and Date Payment is Needed:**
7. **Project Budget:** (Please include a project line item budget including income and expenses. The table below is provided as a template that you are encouraged to use to submit your project budget data. Expense and revenue categories should be entered, along with corresponding dollar amounts for each. Please include fiscal year information [e.g., 7/1/2014 – 6/30/2015].)

	Fiscal Year
Expense Categories	Amount
Total Expenses	
Revenue Categories*	Amount
Total Revenues	

*When listing foundation gifts, please list each gift as a separate revenue line.

8. **List All Entities Asked to Give Financial Support for the Proposed Project and requested amounts.**
9. **Please email the grant application and additional documentation to [Amanda Hayden](#), or for more information, please call Robin Haire at 662-844-3501**

Applications that meet all guidelines are submitted to the QOL committee to be voted on for approval. The committee’s decision will then be emailed to the applicant.

-APPROVAL FOR A QUALITY OF LIFE GRANT FOR PAST EVENTS DOES NOT GUARANTEE FUTURE APPROVAL-