



County of Santa Barbara
 105 E. ANAPAMU, SANTA BARBARA, CA 93101
HUMAN SERVICES COMMISSION

Grant Application for 2017-18 Fiscal Year "Mini-Grants" - \$5,000 - \$7,000

Instructions: Apply via email to Susan Foley, foley@countyofsb.org or in person at 105 E. Anapamu St. #406, Santa Barbara CA, 93101. Please review the Notice of Funding Availability (NOFA) that accompanies this application for requirements. Contact Susan Foley at 805.568.3522 with questions. Deadline for emailed electronic submissions is **Friday, December 16, 2016**.

******Return maximum two page application******

Mini Grants are considered "catalyst" grants to support the growth and development of an organization, not to run a program. Examples include activities which build capacity: staffing, research, education, training; policy development; collaborative venture with another organization; activity to boost volunteerism; advocate or conduct media campaign to support the organizations mission; efforts to improve evidence-based practices. All agencies are expected to explain how they address cultural and language access needs through their programs.

1. Name and address of Organization: _____
2. Total Request (\$5,000 - \$7,000): _____; Agency is a 501(c) 3? _____
3. Regular business of the agency: _____
4. Executive Director: _____ Phone #: _____ Email: _____ Website: _____
5. Staff responsible: _____ Phone#: _____ Email: _____
Expertise _____
6. Years Agency has been in operation: _____ Executive Director _____ program manager _____
7. Other funding secured for this grant activity (attach budget): _____
8. Identify which target population will ultimately benefit from your strengthened organization: (i.e., elderly, disabled, HIV/AIDS, homeless, children, youth, low income) _____
9. Please state the name of the capacity building program (i.e., organizational development, volunteerism, collaboration, advocacy, training/education/research) and describe overall goals that you are proposing. Be specific, achievable and measurable: _____
10. Describe any measurable outcome(s) tied to the capacity grant _____

11. Current Mini Grant Awardees please provide status of current grant: _____

We certify that the information in this application is true and accurate to the best of our knowledge and is submitted with our Board of Director's Governing Body's full knowledge and endorsement.

Board President: _____
 Executive Director: _____