

**TOWN OF SNOWMASS VILLAGE  
COMMON GRANT APPLICATION  
For Year 2011 - 2012 Disbursement**

**CITIZEN'S GRANT REVIEW BOARD  
MUNICIPAL CODE OF ETHICS**

Related to the Municipal Code of Ethics, Sec. 2-93, Prohibition against gifts and favors. No official or employee shall accept any valuable gift, service, loan, thing of value, favor, promise or other valuable consideration as defined in Section 24-18-104(2) and (3), C.R.S. from any person or entity, which may tend to influence the discharge of official duties or give the appearance of undue influence.

(Ord. 13-1992 §2, Ord. 10-1997 §2, Ord. 9-2001 §1)

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**APPLICATION DIRECTIONS & PROCESS - READ CAREFULLY CHANGES SINCE  
LAST YEAR**

1. Application must be submitted **electronically or one hard copy** 8 ½ x 11" paper double sided with at least a 1-inch margin on the left and right side and numbered at the bottom center of each page and do no staple please use paper clip.
2. **Please submit only the information requested.**
3. Please answer the following questions in the following order: (Include topic headings at the beginning of each new section and the bullet-point questions prior to each answer. Please limit your information to six pages, plus the three attachments listed on page four.

**ORGANIZATION SUMMARY (see attached)**

**PROGRAM/PROJECT BUDGET (see attached)**

**AGENCY INFORMATION**

- Mission Statement (brief statement of organization's goals and objectives)
- Brief summary of organization's history
- Description of current programs, activities and accomplishments.

**PURPOSE OF GRANT**

- Description of goals and objectives for the purpose of this grant.
- Description of activities planned to accomplish these goals (is this a new or ongoing activity on the part of the sponsoring organization?)
- Timetable for implementation.

- Please list any appropriate partners and their contributions to the project or organization.

#### **EVALUATION**

- What will be the measurable results (for example: How many communities or people will this project serve? Are youth involved? etc.)
- How will the organization define and measure success?
- How will the project's results be used and/or disseminated?
- To what degree will the project and/or organization have a long-term sustainable value to the community of Snowmass Village?

#### **FUNDING**

- List all sources of funds and the level of funding provided by any partners that go towards your organization and/or project. (Distinguish between secured funding and potential funding from each source.)

4. Submit a hard copy to Rhonda B. Coxon, TOSV, P.O. Box 5010, Snowmass Village Colorado 81615 or an electronic copy to [rcoxon@tosv.com](mailto:rcoxon@tosv.com) for distribution to the Citizen Grant Review Board.

## ORGANIZATION SUMMARY

Organization Name:

\_\_\_\_\_

Mailing Address:

\_\_\_\_\_

\_\_\_\_\_

Contact Person:

\_\_\_\_\_  
(Name) (Title)

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Federal Tax ID: \_\_\_\_\_ State Tax ID: \_\_\_\_\_

Brief Description of Request and why the purpose of your grant request is important to Snowmass Village:

(Please limit your response to two paragraphs.)

**Amount of Request: \$** \_\_\_\_\_

Number of Snowmass Village Residents, Employees and/or Visitors that participate and/or benefit from this organization and/or the program that you are proposing: \_\_\_\_\_

In what way do they participate or benefit?

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Has your organization applied for a grant from the T.O.S.V. before? YES \_\_\_\_\_ NO \_\_\_\_\_

If so when was the last year your organization applied? \_\_\_\_\_

Did your organization receive a grant payment (a check) from the Town of Snowmass Village in March of 2011? YES \_\_\_\_\_ NO \_\_\_\_\_

How much was the grant for? \$ \_\_\_\_\_

How was the grant money used?

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Attachments:

1. Board of Directors and Key Staff
2. Most recent financial statements
3. Copy of Organization's IRS determination letter indicating tax-exempt status

# PROGRAM / PROJECT BUDGET

PROGRAM  
NAME: \_\_\_\_\_

Itemize: (Personnel, promotion, supplies, services, etc.)	Amount:
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
<b>Total Cost (A)</b>	\$ _____
Funds available for Program: Gifts & Grants/pledged or paid (If applicable)	
Trustees:	\$ _____
Corporations:	\$ _____
Foundations:	\$ _____
Individuals:	\$ _____
Government	\$ _____
Other (earned income, special events, memberships)	\$ _____
<b>Total Funds Available (B)</b>	\$ _____
<b>BALANCE REQUIRED (A minus B)</b>	\$ _____
<b>AMOUNT REQUESTED</b>	\$ _____