**Brookings COVID-19 Relief Fund Application**

**REQUEST & CRITERIA FOR PROPOSALS**

Brookings Area United Way announces the availability of Brookings COVID-19 Relief Fund Application, established to help provide support to local organizations that experience an unanticipated, substantial change in client need due to the COVID – 19 Pandemic.

Beginning April 17, 2020, funds will be eligible for distribution to 501(c)(3) or other IRS designated Not-for-Profit organizations in Brookings County. Funding has been made available through generous individual and business donors in our community.

The Brookings COVID-19 Relief Fund is a collaborative effort and embraces the partnerships already in existence though our United Way. When needs go beyond the scope of those partnerships, the Fund will have the capability to step in, assess and consider what kind of relief or resources are available, and work together toward a solution. Grants will be recommended by a joint advisory committee made up of representatives of the Brookings Foundation and the Brookings Area United Way Board of Directors.

The Brookings Foundation and the Brookings Area United Way, in consultation and in partnership with other community organizations, will administer grants from the fund in phases, initially to help address immediate needs and then through the short-term and longer-term impact of the pandemic outbreak and recovery.

​During the immediate relief phase, priority will be given to community-based organizations providing basic needs services to people who are immediately and inordinately suffering from this pandemic. This initial wave of funding will identify potential grant recipients by using input, guidance, assessment and research from organizations and others in the community to make decisions on grant allocations. Grants will be allocated on a rolling basis as fundraising continues throughout the cycle of this outbreak and the recovery phases making it possible to move resources quickly and to be able to adjust to the evolving needs going forward.

**REVIEW & AWARD**

Final recommendations are subject to approval by the joint advisory committee. We ask that organizations allow 2 – 3 weeks for award determinations.

**Achievement Report Requested:** When a grant is awarded, representatives from funded organizations will be expected to submit an Achievement Report back to the committee with a letter summarizing their use of the grant. Achievement Reports are due 6 months after award date.

Thank you again for your interest in partnering with United Way in meeting the needs of thousands of individuals in Brookings County. Your work during this difficult time is deeply appreciated.

Please contact United Way at [uw@brookingsunitedway.org](mailto:uw@brookingsunitedway.org) or call (605) 692-4979 with any questions or concerns.

**COVID 19 Relief Fund Grant Application**

**ORGANIZATION & FUNDING REQUEST INFORMATION**

Name of Organization:

Organization EIN#:

Address:       City:       State:      Zip Code:

Contact:       Email:       Phone Number:

**Funding Request: $**

**NON-PROFIT STATUS**

Any organization applying for funding must provide and comply with the following requirements.

***Please initial to verify agreement.***

      Include a copy of the most recent **Nonprofit Report for the South Dakota Secretary of State, if not a United Way Funded Partner**

      Include a copy of your most recent **Form 990, if not a United Way Funded Partner**

**FINANCIAL INFORMATION**

It is a grant requirement to provide and comply with the following financial requirements.

***Please initial to verify agreement.***

      A copy of your organization’s most recent **Balance Sheet.**

      A specific **budget breakdown** of costs associated to expanded programming due to the COVID 19 pandemic.

**PROGRAM INFORMATION**

Please explain, in detail, how your organization has experienced an unanticipated, substantial change in client need due to the COVID – 19 Pandemic:

Number of people served or anticipate serving:

**CERTIFICATION OF APPROVAL**

***I affirm that I have reviewed this funding request form and to the best of my knowledge the information I have submitted is true & complete.***

Name of Organization Director:

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:

Please complete and email application and appropriate documents to [uw@brookingsunitedway.org](mailto:uw@brookingsunitedway.org).