



2017-2018 POST

GRANT REQUEST PACKAGE

2017-2018 AMVETS POST GRANT APPLICATION INSTRUCTIONS**APPLICATION PROCESS**

The AMVETS Post Grant Application packet consists of the Instructions, Cover Page, Contact Page, Grant Request Form, Budget Worksheet, and the Grant After-Action Reporting form. The AMVETS Dept. of California does not fund donations, publication, advertising expenses, salaries or travel, and anything outside the scope of the Project Overview and/or Narrative.

Please note that any award granted in 2017 must be spent by June 15, 2018, (any unused grant funds will be returned to the Department). The Department will also require a full accounting of all monies spent no later than fifteen (15) days after the completion of the grant. Reminder, Grant Funds must be utilized/spent as stated in your grant application. The Department Grant Cycle for the initial year of 2017-2018 (Dec 1, 2017 to Feb. 28, 2018). The following years will be Aug. 1 to Oct. 31. If an applicant is applying for a grant that will span across two Grant Cycles, it must be clearly stated in the Project Narrative.

The Grant Application will constitute an invitation to enter into a contract between the Applicant and AMVETS Department of California. Approval of the Grant Request creates a contract and the Applicant will be held to the terms set forth by the Grant Request, the Budget Worksheet, and outlined in the Award Letter. Breach of the terms of the Grant Request, Budget Worksheet and/or the Award Letter may result in the negation of the Grant, therefore requiring the return of the complete award to the Department. Note, future grant approval will be in jeopardy.

ELIGIBILITY

Any AMVETS Post applying for an AMVETS Dept. of California Grant must be compliant at all levels with State and Federal authorities governing not-for-profit organizations and be re-validated by the AMVETS Dept. of California.

AWARD LIMITS

Due to budget constraints, the AMVETS Dept. of California will not award more than \$1,000 for a single request.

APPLICATION INSTRUCTIONS

The Applicant must submit a concise, readable, proposal and follow the directions carefully.

Assemble the Grant Application in the following order (1-4 only):

1. Cover Page
2. Contact Page
3. Grant Request Form
4. Budget Worksheet
5. Post Grant After-Action Reporting Form (to be sent in No-Later-Than 15 days after the completion of the Grant)

The Department may decide to award less funding than requested by an applicant, in which case, the applicants shall have the opportunity to modify their budget and project objectives accordingly or decline to accept the grant.

Grant Applications must be received by the Department Grant Committee no later than February 15, 2018. Applications received beyond the listed date may be considered.

Completed applications should be mailed to the following address:

AMVETS Department of California
c/o Post Grant Requests
157 South K Street
Tulare, CA 93274





Department of California

“Committed To Serve... Those Who Served” ®

APPLICATION NO.: _____
(Assigned by Department)

TEAM AMVETS 2017-2018 POST GRANT CONTACT SHEET

Post No. _____

EIN: _____

Requestor: _____
Post _____
Mailing _____

Title: _____

Address: _____

Phone: _____

Total # of Grants _____

Email: _____
Total Amount Requested \$ _____

Grant Requestor's Signature

Date

The undersigned hereby acknowledges that the information provided in this application is correct to the best of their knowledge and that the applicant's Post has approved submission of this request for funding.

Post Commander

Post Adjutant

I hereby verify that Post _____ is compliant with the Federal and State regulations governing not-for-profit organizations and all AMVETS policies and procedures allowing said post to legally apply for, and receive, a grant from the AMVETS Department of California.

AMVETS Department of California
Director of Operations

AMVETS Department of California
Executive Director's Signature





Department of California

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TEAM AMVETS 2017-2018 POST GRANT REQUEST FORM

Post # _____ Request # _____ Requestor _____

Project Title _____ Amount Requested \$ _____

Natl. Reportable Program _____ Date of Project _____

PROJECT BRIEF OVERVIEW

STATEMENT OF NEED

PROJECT OBJECTIVES

PROCEDURE

OUTCOMES

PERSONNEL

TIMEFRAME

BUDGET

Attach “Team AMVETS 2017 Post Grant Budget Worksheet”

If more space is needed, please attach additional sheets.



Department of California

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TEAM AMVETS 2017-2018 POST GRANT BUDGET WORKSHEET

Post # _____ Request # _____ Program Date _____ Grant Amount \$ _____

Project Title _____

ITEM	DESCRIPTION	COST	QTY	TOTAL
1		\$		\$
2		\$		\$
3		\$		\$
4		\$		\$
5		\$		\$
6		\$		\$
7		\$		\$
8		\$		\$
9		\$		\$
10		\$		\$
11		\$		\$
12		\$		\$

