

**MASSACHUSETTS CONVENTION
CENTER AUTHORITY**



**COMMUNITY PARTNERSHIP PROGRAM
*GENERAL GRANT APPLICATION 2010***



MASSACHUSETTS CONVENTION CENTER AUTHORITY COMMUNITY PARTNERSHIP PROGRAM

GENERAL GRANT INFORMATION

An internal committee of the MCCA will review grant applications and determine which programs will receive funding. Only requests from Boston-based, non-profit organizations working with at-risk youth, women or seniors, as well as programs revitalizing or improving a neighborhood and therefore improving the convention, tourist or visitor experience, will be reviewed. Requests for funding will be reviewed once a year. Applications for the current grant cycle must be received by **March 18, 2010**.

GRANT PROPOSAL EVALUATION CRITERIA

Proposals for grants will be evaluated on the following criteria:

- Organizations must be based in Boston.
- Organizations receiving funding must be a recognized 501c3.
- Only grants that meet the two following criteria would be considered:
 - At-risk youth, women and seniors
 - Any program that revitalizes or improves a neighborhood and therefore improves the convention, tourist or visitor experience.
- No capital campaign funding.
- No grant shall exceed \$5,000.
- No donations to political causes or political action committees.
- Organizations will be required to furnish a purpose for their request (e.g., new education program, 2010 annual event, etc.)
- Incomplete applications may not be accepted. All forms must be filled out in their entirety.
- Provide **10 copies** with (one unbound reproducible copy) upon submission.
- **Failure to include a current IRS determination letter indicating tax-exempt 501(c)(3) status will result in disqualification of the application.**

Please submit original, completed applications directly to:

Colleen Richards Powell
Community Partnership & Hospitality Scholarship Fund
Massachusetts Convention Center Authority
415 Summer Street
Boston, MA 02210
(No faxes or electronic versions will be accepted.)



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PART I: ORGANIZATION INFORMATION:

Name of organization

Address *City* *State* *Zip*

Telephone *Fax* *Website*

Executive Officer's name *Title* *Phone* *E-mail*

Contact Person (if different than Executive Officer) *Title* *Phone* *E-mail*

Address of Contact Person (if different from above) *City* *State* *Zip*

Is your organization certified by the Internal Revenue Service as a 501(c)(3) non-profit?
 Yes No

Tax Identification Number (FIN#): _____

Has your organization previously received grant funding from the MCCA?
 Yes No

If yes, please list amount: _____ Year _____

(Please Note: Failure to submit Grant Reporting Forms based on previous grant award(s) may result in disqualification.)

Please attach a copy of (1) your current IRS determination letter indicating tax-exempt 501(c)(3) status and (2) classification (“not a private foundation”) status.

Please provide a timetable for meeting your program objectives.

Total Number of staff: Full-time: _____ Part-time: _____

Total Number of Volunteers: _____

PART III: BUDGET INFORMATION:

On the additional form, please provide a program budget that lists projected funding and expenses, the nature and source of funding (including any non-Massachusetts Convention Center Authority funding, if applicable), and describing your long term funding strategy for the project, if applicable.

Total Amount Requested: _____

I declare that the information contained within this application is complete and true to the best of my knowledge. I realize that making a false statement could cause the organization's application to be void, and I understand that failure to include a current IRS determination letter indicating tax-exempt 501(c)(3) status will result in disqualification of the application. I hereby authorize the release of this application and its supporting documents to appropriate persons within the Massachusetts Convention Center Authority in confidence as part of the application selection process.

Print Name

Title

Signature

Date