

**Kirby Civic Events Fund
at the
Polk County Community Foundation**

- 2010 -

The Kirby Civic Events Fund is part of the Kirby Endowment Fund. The Kirby Endowment Fund supports many different organizations and community activities, scholarships and projects in the Tryon area with annual grants and awards. Mr. and Mrs. Davis G. Kirby and Katherine Kirby established the Kirby Endowment Fund to provide edification and enjoyment to area residents of all ages and walks of life. The Polk County Community Foundation is a public charity founded in 1975 by a group of generous and visionary community leaders who wished to improve the quality of life in our area. It is completely funded by gifts and bequests from our local community.

Which organizations may apply? Qualified applicants include local Polk County nonprofits and organizations primarily supported by tax dollars that serve the citizens of the community centered in and around Polk County. Churches and other civic organizations may be eligible for a grant depending on the nature of the project. If your donors do not receive tax deductions for contributions to your organization, or your organization is a church, please contact our Grant Manager for details about eligibility.

What types of grants may be awarded? Grants are awarded to one or more community organizations in support of enjoyable civic events in the Tryon area. These civic events must be free to the public.

Total grant funds available in 2010: \$2,000. All funds may be awarded in the first cycle. If funds remain after the first cycle, there will be a second grant cycle. Please inquire.

Questions? For additional information concerning this or other grant applications, or help with your unique situation, please contact our Grant Manager at the Polk County Community Foundation.

You may visit us at 255 South Trade Street, Tryon, NC or at www.polkccf.org; call 828-859-5314; or email: grants@polkccf.org.

Application Deadline:

First Cycle: By Tuesday, January 12, 2010 at 1:00 p.m.

Second Cycle (if funds remain after first cycle): By Tuesday, May 4, 2010 at 1:00 p.m.

Notification of funding decision:

First Cycle: By Friday, March 12, 2010

Second Cycle: By Friday, July 2, 2010

Kirby Civic Events Fund

COVER SHEET (must be submitted in this form on one page):

Date of Application: _____

Organization Name: _____

Address: _____

Telephone Number: _____ Email: _____

Name and Title of CEO/Executive Director/President/Board Chair/Principal:

Name: _____

Title: _____

Telephone Number: _____ Email: _____

Contact Person for this grant application (if different from above):

Name: _____

Title/Role in the organization: _____

Telephone Number: _____ Email: _____

What is your tax identification number? _____

What is your nonprofit status? _____
Enclose IRS 501(c)(3) letter (required) or explain your charitable status if not a 501(c)(3). (eg. Unit of Government)

Is your organization more than five years old? _____

Project Title: _____

Grant Request: \$_____ Total Project Budget: \$_____

When will you use the grant funds? _____

Are you planning a civic event in the Tryon area? _____ Yes _____ No

Is the event free to the public? _____ Yes _____ No

- A. On a separate sheet, please briefly answer each of the following questions. Please type or print clearly. Your answers may be used to publicize successful grant applications.
1. Summarize your organization's mission in two or three sentences.
 2. What is your event?
 3. What are your objectives in hosting your event?
 4. Who will be involved in carrying out the plans outlined in this request? Include a brief summary of the qualifications of the key individual(s) involved.
 5. List other funding sources, if any.
 6. If you receive a grant, how will you acknowledge the support from the Kirby Civic Events Fund at the Polk County Community Foundation?
- B. Attach a detailed project budget on a separate sheet. The total on your attached detailed project budget should match the "Total Project Budget" listed on the cover sheet.
- C. Optional. Your application may be stronger if you include a letter of recommendation from an individual familiar with this proposed event.

I certify that the information contained in this proposal is true to the best of my knowledge and I have the authority to commit the organization to this project.

Signature

Printed Name

Title: _____ Date: _____

This must be signed by the person who is listed as the head of your organization on the cover sheet.

Please deliver applications to:

Polk County Community Foundation
255 South Trade St.
Tryon, NC 28782

Incomplete, incorrectly formatted, late, emailed or faxed applications shall not be considered. All application materials must be submitted together in one package. If you wish, you may schedule an appointment well before the deadline with our Grant Manager. During your appointed time, you may ask the Grant Manager to certify that your application has been turned in on time and is complete.