



## **2021 Grant Program Requirements**

### **Eligibility**

Organizations must be a part of the MetroWest community and qualify under the IRS Section 501(c) (3) Code. The MetroWest community includes the following towns: Ashland, Framingham, Holliston, Hopkinton, Marlborough, Medway, Millis, Natick, Sherborn, Southborough, Sudbury and Wayland.

### **Types of projects to be funded**

- Education and/or services in the field of healthcare
- Research in the field of healthcare
- Improving public health and/or social services for children, adults and seniors

### **Project description**

- State the goal of the project.
- Has the project been funded in the past two years? By whom? And how much?
- Provide a realistic timetable for completion.
- Provide an itemized budget for the project.

### **Procedure for submitting a proposal**

Attachments to be included:

- Current copy of IRS Determination letter
- Names of current governing Board of Directors
- Most recent Annual Report and Annual Treasurer's Report
- Grant applications **must be received by February 26, 2021.**
- Email to: framunionaid@gmail.com

### **Review Process**

Each application will be reviewed by the full Grant Committee. The review process may include interviews and/or site visits.

### **Notification**

Grant recipients will be notified in April 2021.

### **Schedule of payments**

Grants will be awarded via US mail.

### **Reporting requirements**

Upon accepting a grant, you are required to submit a performance report **no later than February 1, 2022.** The report must describe the project, its outcome, a final evaluation and an accounting of the money awarded.

**Questions**

Questions may be emailed to [framunionaid@gmail.com](mailto:framunionaid@gmail.com) or call Melissa Ford at 508-733-2449.

**Framingham Union Aid Association, Inc.**

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Framingham, MA 01702

framunionaid@gmail.com

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The F.U.A.A. is a community-based, 501c3 tax-exempt corporation.

## 2021 Grant Application

Organizations must be a part of the MetroWest community and qualify under the IRS Section 501(c) (3) Code. The MetroWest community includes the following towns: Ashland, Framingham, Holliston, Hopkinton, Marlborough, Medway, Millis, Natick, Sherborn, Southborough, Sudbury and Wayland. We do not fund salaries or stipends.

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

Name of organization: \_\_\_\_\_

Title of project: \_\_\_\_\_

Contact person: \_\_\_\_\_

Address: \_\_\_\_\_

Town, state, zip: \_\_\_\_\_

Tel: \_\_\_\_\_

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

Email: \_\_\_\_\_

Organization must be a 501c3 under the IRS code. Date of last filed report with MA Attorney General: \_\_\_\_\_

Total grant request: \$ \_\_\_\_\_

I attest that all the information provided is correct.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

Project Description

(If additional space is needed, please attach to this form.)

Title of project: \_\_\_\_\_

Is this a new or on-going project? \_\_\_\_\_

Start date: \_\_\_\_\_

Has the project been funded in the past two years? \_\_\_\_\_

If so, by whom? \_\_\_\_\_

For how much money? \$ \_\_\_\_\_

What is the timetable for completion? \_\_\_\_\_

Describe the project. State the goal and objectives, the methods to be used, the population to be served, and the methods to evaluate the outcome.

What is the total cost of the project? \$ \_\_\_\_\_

What is the total grant money requested? \$ \_\_\_\_\_

Will the project be co-funded? \_\_\_\_\_

If so, by how much? \$ \_\_\_\_\_

If applying for full funding, have you applied for full funding from other organizations? Please list those organizations.

Please provide an itemized budget for the entire project, as well as an itemization of the portion to be funded by F.U.A.A. **\*NOTE: WE DO NOT COVER SALARIES.**

**All applications and requested materials are due by February 26, 2021. Applications should be emailed to framunionaid@gmail.com.**