



COUNTY OF HANCOCK
Human Resources Department
50 State Street, Suite 7
Ellsworth, Maine 04605

Commissioners:
William Clark, District I
John Wombacher, District II
Paul Paradis, District III

Michael Crooker
County Administrator

COMMUNITY BENEFITS GRANT APPLICATION

INSTRUCTIONS:

This application is for use in applying for a grant from the Hancock County Community Benefit Fund. The information provided in this application will be used by the County Commissioners to evaluate your organization's grant request and it is imperative that you submit detailed, accurate information as requested.

In this grant period, there is \$80,000 available. Requests will be capped at \$20,000.

Please return a completed Grant Application in order to be considered for a grant to be awarded this year. If a section or question is not applicable to your grant, please indicate so. Applications can be dropped off or mailed to the County Administrator at 50 State Street, Suite 7, Ellsworth, Maine 04605 in a sealed envelope and clearly marked on the outside of the envelope, COMMUNITY BENEFIT GRANT APPLICATION. The application period will be open until 4:00 p.m. on Friday, February 9, 2024.

It is acceptable to retype this form on your own or if filled out by hand, please use blue or black ink and write legibly.

Category in which you are applying: Please check the most appropriate selection:

- Economic Development
- Tourism
- Community Development
- Help Disadvantaged

GENERAL INFORMATION REGARDING YOUR ORGANIZATION:

I. Organizations Name: (Please also provide a web site if applicable)

II. Mailing Address:



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III. Contact Information: Must be authorized to act on behalf of your organization

A. Name of person completing this application: (Applicant)

B. Applicant's position with the organization:

C. Applicant's preferred telephone number:

D. Applicant's preferred e-mail address:

IV. Please provide, on a separate sheet of paper, a brief history (one page) of your organization; include the date your organization was founded, as well as its experience and expertise in its given field.

INFORMATION REGARDING GRANT REQUEST AND ORGANIZATION'S CHARITABLE PROJECTS AND PROGRAMS:

I. What is the amount of your grant request? \$ _____

II. Are matching funds available? _____

III. What is the total budget for the project or program for which this request is made? \$ _____

IV. List other sources of funds for your organization's project or program.

V. Please answer, using the attached form titled "Appendix A", questions concerning sources and uses of funds as well as impact and employment goals for the project you are applying for. Your answers will be scored as outlined in the Application Criteria included in this packet.

VI. Is your organization a non-profit, charitable organization? _____

VII. Are these grant funds for a special project or regular operating expenses?



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APPLICANT'S ACKNOWLEDGEMENTS:

By submitting this application, your organization acknowledges and agrees that:

1. The County of Hancock is under absolutely no obligation to award a grant to your organization.
2. If awarded a grant, your organization will use the funds only for the purpose(s) for which the grant is made.
3. If it appears that grant funds are misused and/or diverted from their intended purpose, the County of Hancock reserves the right to withhold and/or recover such funds.

Submitted on behalf of the above-named organization, this _____ day of
_____, 2024.

By: _____

Its. _____



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Appendix A

Please provide in the space below, answers to the following questions. The maximum submission must be kept to a maximum of these two pages.

Overall Impact: Please explain the size of your service area and if other non-profits also serve similar services in your area. Please project how many Hancock County residents will benefit from this grant. Who will benefit from the work or positive outcomes of your project? How will your project/program improve the economic/social situation in Hancock County?

Creation/Retention of Jobs - Please provide job creation/retention estimates and why you believe that the number of jobs will be created or retained.



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Funding sources- Please indicate below any other government funds your organization receives. Describe below your 2023 operating budget (minus any capital projects), any other matching grant funds and the ratio of your grant request to your total 2023 operating budget. Please indicate if your organization received any funds from Hancock County from any sources in 2022 and/or 2023 and those amounts. Are some of your operating funds from a source that you can either increase or lobby for a greater award (i.e., fees or an annual operating budget).

Additional information: Please provide any additional information you would like to tell us about your Company/Organization and why you feel you should be awarded these funds.