



Discretionary Grant Program Application Form

A. Applicant Information		
Organization:		
Street Address:		
City:	State:	Zip Code:
Name of Designated Contact:		
Email Address:	Phone Number:	

B. Grant Request		
Type of Grant: (Check one:)	<input type="checkbox"/>	Block Grant (Maximum Grant Award \$500)
	<input type="checkbox"/>	Matching Grant (Maximum Grant Award \$2,000, 50% match req.)
Grant Amount Requested:	\$	

C. Submission Requirements Check List	
<i>Please check each box and attach information to this application.</i>	
<input type="checkbox"/>	1. Description of program, services, or other activities this grant will fund
<input type="checkbox"/>	2. Proposed budget for the planned activities
<input type="checkbox"/>	3. Evidence of matching funds
<input type="checkbox"/>	4. Proof of 501(c)3 status or Dublin school affiliation
<input type="checkbox"/>	5. Detailed operating budget for current fiscal year
<input type="checkbox"/>	6. List of current board of directors or governing body

D. Disclosures	
<i>Check one:</i>	
<input type="checkbox"/>	This organization has no affiliations with City Council, other local governing board members, or City staff members
<input type="checkbox"/>	This organization has affiliations with City Council, other local governing board members, or City staff members
<i>Please list the affiliations below:</i>	

E. Signature and Declaration	
<input type="checkbox"/>	<i>I have reviewed and understand the Discretionary Grant Program Guidelines and reporting requirements.</i>
<input type="checkbox"/>	<i>I declare that all the information provided is correct to the best of my knowledge. I understand that any false statements made may be grounds to deny this application for grant funding.</i>
Applicant Signature:	Date:

Please submit this application form and all required submission documentation via email to John.Stefanski@dublin.ca.gov.

City Use Only		
Received by:	Date:	Council Approval:
Approved:	Denied:	
Notes:		