

CHELMSFORD COMMUNITY ACTION PROGRAM APPLICATION GUIDELINES

GOAL:

To solicit and encourage the people of Chelmsford to develop programs of civic projects for the benefit and enjoyment of the citizens of Chelmsford.

ASSISTANCE:

The Committee can make awards up to 50% of an individual project's budget; no more than \$2,500.00 will be expended in any given calendar quarter. The amount of each grant **will** vary due to the project to be undertaken and at the discretion of the Committee.

The Committee may be the sole source of funding for any project with a total budget under \$250.

APPLICATION:

The applicant or applicants must show that;

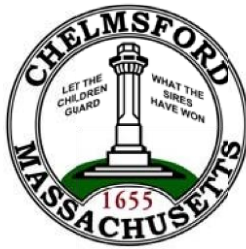
1. The project will improve the neighborhood and the Town as a whole;
2. The applicant(s) have the knowledge and ability to carry through with the project, as demonstrated by written comments, plans, budget and the names of those involved;
3. A schedule for completion has been prepared;
4. The Town will not be held liable for injuries sustained by people working on the project.
5. Complete a Project Summary Report within 30 days of project completion and submit photos by email to TMOffice@ChelmsfordMA.GOV

HOW TO APPLY:

Applications will be available at the Town Offices and on the Town website at www.townofchelmsford.us. Applications are accepted quarterly from individual citizens or local groups. Quarterly application deadlines are December 1st, March 1st, June 1st and September 1st. Applications will be reviewed by the Committee and approved or disapproved based on the benefit to the community. Applications will be reviewed by the Committee and project proponents will be required to make a presentation to the Committee prior to selection. Applications shall remain eligible for one (1) calendar year from the date of receipt. Applicants must contact Town staff and licensing authorities to determine whether any permits or approvals will be required. **Applicants can only receive funding from one Town committee.**

Return all application materials to: TMOffice@ChelmsfordMA.GOV

<http://www.townofchelmsford.us/274/Community-Action-Program-Committee>



**CHELMSFORD COMMUNITY ACTION PROGRAM
GRANT APPLICATION**

NAME: _____ **DATE:** _____

ADDRESS: _____
Street Town State Zip

TELEPHONE: (____) ____ - ____ (____) ____ - ____
Day Evening

EMAIL: _____

ORGANIZATION: _____ Troop
(if applicable) _____

ORG. CONTACT: _____ **PHONE** (____) ____ - ____

PROJECT DESCRIPTION: Provide a brief summary of the proposed project.

BENEFIT: Provide a brief summary of the project's benefit to the community.

BUDGET: \$ _____ + \$ _____ = \$ _____
Grant Request 100% Match Total Budget

LOCATION OF PROJECT: _____

ANTICIPATED START DATE: _____

ANTICIPATED COMPLETION DATE: _____

FUNDRAISING STRATEGY: _____

*At the completion of the project, it is required that grantees provide CAPC with the completed Project Summary Report and photos within 30 days. NOTE: Failure to comply could impact future grants to others in your organization.

ADDITIONAL INFORMATION:

Provide a full description of the project. Include the objectives, who will benefit, maintenance requirements (if any), the status of any required permits and a budget. The budget should include estimates of all expenses; how much is being requested through this grant; the amount of matching funds that will be contributed, and how those funds will be raised; and the total project cost. The project description should be concise, but sufficient to describe the project.