

# **Trustees of the New Castle Common**

## Community Grant Application Form

### **To apply and submit the PDF application form:**

Save (download) this PDF file to your computer.

Open the PDF application form you downloaded.

Fill out the form and save it with your data in it.

Attach the completed form to an email sent to [office@trusteesncc.org](mailto:office@trusteesncc.org).

If you have questions please call the Trustees office at 302-322-2809.



## **Trustees of the New Castle Common**

### **Community Grant Application**

#### **Request for Funding for Fiscal Year 2023-2024 (April 1, 2023 - March 31, 2024)**

This completed form must be received by December 31, 2022 via email to [office@trusteesncc.org](mailto:office@trusteesncc.org), or regular mail to P.O. Box 427, Historic New Castle, DE 19720 or delivered to the Trustees office at 807 Frenchtown Road, New Castle, DE 19720. If additional information or clarification is needed, please call the Trustees office at 302-322-2809.

Organizations within the town of Historic New Castle may apply for grants. The Trustees mission is to manage its resources “for the benefit of the citizens of Historic New Castle.” Citizens are defined as the residents of the incorporated area of the City.

If an organization has activities both inside and outside of the Historic New Castle City limits, the Trustees can only support those activities within the City. Information and documentation provided must clearly indicate the location of services provided.

The following information must be detailed and specific to the amount being requested. The Trustees receive requests for more funds than are available and your detailed input is helpful in prioritizing funding. Please expand areas below for each response, as needed. NOTE: The Trust will not approve a grant request used to support that organization's philanthropic activities.



Applicant Organization Information (please print or type):

Organization:

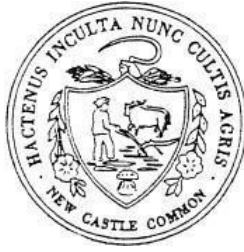
Officers or Board of Directors:

Address:

Telephone #:

Email:

1. Amount Requested and Timeline for Use of Funds: (Receipts will be required showing that funds were for the benefit of the citizens of Historic New Castle. Invoices, receipts, credit card statements etc. are required before disbursement of any funds – please plan accordingly.)
2. Explain how your organization would use these funds?



3. What do you plan to accomplish with the grant and how will it benefit the citizens of Historic New Castle? (If more space is needed, please attach supplementary sheets, and any supporting documentation you deem appropriate.)

Additional Comments:

PLEASE NOTE: Information on grants awarded will be available after April 1, 2023.

Upon review of your request, you may be contacted to provide additional information and/or a brief presentation to give further details pertaining to your application.

Person submitting this request:

Name/Title: \_\_\_\_\_

Phone: \_\_\_\_\_

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

Signature: \_\_\_\_\_

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