

# **Important Dates:**

Application Deadline Grant Awardees Announced Mandatory Grantee Orientation June 30, 2024 July 31, 2024 August 26, 2024 (6pm in City Council Chambers)

Grantees are expected to complete their projects within six months of grant distribution. For any questions, please contact City Clerk Jessica Zalenski at 304-234-6401 or **jessica.zalenski@wheelingwv.gov** 

#### **Application Checklist:**

□ Completed application

□ Sustainability plan

- $\square$  3 or more volunteer contacts
- □ Pictures of the project site
- $\Box$  Expense table

\*If a project is to take place on private property: A letter of permission from the owner for your group to use their property. \*

## **Contact Information:**

Full Name:

Title/Role (if applying as an existing organization or community group):

Email (if applicable):

Phone:

Alternate Phone Number (if applicable):

Preferred Method of Communication: O Text O Phone O Email



How did you find out about Love Your Neighborhood?

Please circle Yes or No for the following questions:

Do you agree to submit periodic progress reports, including photographs of the project site improvements and community engagement efforts, while the project is being implemented?

Yes

No

Can project be completed within the six-month time period?

Yes

Do you agree to submit a final report upon project completion?

Yes

No

No

No

Do you agree to submit before and after photographs as well as the possibility of being interviewed on camera?

Yes

Do you or a representative from your group, agree to attend the Mandatory Orientation? Yes No

| Signature: | Date: |
|------------|-------|
|------------|-------|

# **Project Information:**

Project Name:

Project Site Location (Please be specific, provide address & block/lot if available):



Is the Project located on Private Property? Yes No If the project is located on private property, please include a letter from the property owner offering permission for your group to complete your project if selected.

Short Project Description:

Describe the need(s) your project addresses within the community and its impact.

List any community partners (churches, local businesses, etc.) and/or volunteers (neighbors, family members, friends) that will assist with your project.

What are you planning to measure to show what difference your project had in the community? (i.e.: plant trees, engage local business owners, # of houses painted, etc.)

How does your project promote neighbors working together, and how do you plan to engage neighbors in your project?

State any obstacles or roadblocks you anticipate may hinder your project's success and how you intend to address the potential challenges:



Do you have any prior experience with similar projects? (please circle yes or no) Yes

No

List the names of three or more volunteers who are willing to participate in your project:

| Name | Phone Number | Email |
|------|--------------|-------|
|      |              |       |
|      |              |       |
|      |              |       |
|      |              |       |
|      |              |       |

# **Budget/Costs/Donations:**

Please complete the expense table for the TOTAL planned expenses of the project. This section includes items, quantities, the purpose of use, whether or not the material can be donated, and the cost of materials.

| Item        | Quantity | Purpose              | Donated? | Cost    |
|-------------|----------|----------------------|----------|---------|
|             |          |                      |          |         |
| Ex. Mulch   | 10 lbs.  | Mulch far the garden | yes      | \$00.00 |
|             |          |                      |          |         |
|             |          |                      |          |         |
|             |          |                      |          |         |
|             |          |                      |          |         |
|             |          |                      |          |         |
|             |          |                      |          |         |
| I<br>Total: |          |                      |          |         |
| 10101.      |          |                      |          |         |



## Sustainability Plan:

Please explain how you plan on sustaining your project beyond the grant period and who will be responsible:

Please list steps that will be taken after completion of the program to maintain the project's effect on the community beyond the grant period.

| Step                        | Goals                                 | Resource/s needed to complete step                  | Person(s)<br>Responsible | Frequency     |
|-----------------------------|---------------------------------------|---|--------------------------|---------------|
| Ex. Maintain<br>cleanliness | Keep litter/debris<br>off the grounds | Two trash<br>receptacles that are<br>emptied weekly | John Doe                 | Weekly checks |
|                             |                                       |   |                          |               |
|                             |                                       |   |                          |               |
|                             |                                       |   |                          |               |
|                             |                                       |   |                          |               |
|                             |                                       |   |                          |               |