

GRANT SUMMARY FORM

PART I – Content Review

Title of Grant: _____

Department(s): _____
 (List lead department first)

Contact Person & Phone: _____

Granting Agency: _____

To which of the following aspects of City Council’s Vision does this grant relate:

- | | |
|---|---|
| <input type="checkbox"/> Bold New Directions | <input type="checkbox"/> Life Long Learning Community |
| <input type="checkbox"/> World Class Maritime Center | <input type="checkbox"/> Neighborhood/Community Transformation |
| <input type="checkbox"/> Robust and Prospering Economy | <input type="checkbox"/> Pride of Past, Promise of Future |

Please explain how this grant relates and ties to the above vision(s), and describe the purpose of the grant:
 (attach additional sheet if necessary)

<u>Approvals:</u>	<u>Signature</u>	<u>Date</u>
Department Head	_____	_____
Deputy City Manager	_____	_____

PART II – Application Approval

Application Due Date: _____

Grant Period: _____

Type of Application: ___ **New** ___ **Continuation** ___ **On-line**

If continuation, number of years previously awarded: ___

Are you anticipating Level Funding with no changes from previous year? ___ **Yes** or ___ **No**

Grant Application – Funding and Budget:

	Funding		Cash	In-Kind	Total Budget
Federal	_____	Personnel	_____	_____	_____
State	_____	Contractual	_____	_____	_____
Other	_____	Travel	_____	_____	_____
Cash Match	_____	Equipment	_____	_____	_____
Subtotal	_____	Supplies	_____	_____	_____
In-Kind Match	_____	Other	_____	_____	_____
Total	_____	Total	_____	_____	_____

PART II – Application Approval, Continued

Match Required: _____

- In-Kind – provide summary
- Cash – identify source (budget line item)

Describe the City’s Obligation/Provision to Continue Program after Grant Expires:

<u>Approvals:</u>	<u>Signature</u>	<u>Date</u>
Human Resources (only if grant includes personnel)	_____	_____
Finance	_____	_____
Grants Coordinator	_____	_____

PART III – Award Notification

Grant Award – Funding and Budget:

	<u>Funding</u>		<u>Cash</u>	<u>In-Kind</u>	<u>Total Budget</u>
Federal	_____	Personnel	_____	_____	_____
State	_____	Contractual	_____	_____	_____
Other	_____	Travel	_____	_____	_____
Cash Match	_____	Equipment	_____	_____	_____
Subtotal *	_____	Supplies	_____	_____	_____
In-Kind Match	_____	Other	_____	_____	_____
Total	_____	Total	_____	_____	_____

* If “Subtotal” is greater than \$50,000, you must obtain City Council approval for transfer.

<u>Approvals:</u>	<u>Signature</u>	<u>Date</u>
Human Resources (only if grant includes personnel)	_____	_____
Finance	_____	_____
Grants Coordinator	_____	_____

PART IV-Grant Not Awarded:

If this grant application has been denied for any reason, please give a brief explanation below and attach a copy of the denial letter to this grant summary form.

PART V-Program Achievement: Please give brief statements of program achievements and effectiveness, using statistical data for continuation grants. If this is a new grant provide projected program achievements using statistical data.
