

2024-2025- Grant Application to the Town of New Milford  
Town Operating Grant Application

**Completed application to be returned to Office of the Mayor, 10 Main Street, New Milford CT 06776**

Organization name:	
Mailing address:	
Town / City / Zip	
Phone #:	
Website:	
Executive Director:	
Executive Director phone:	Email:
Application preparer:	
Contact phone:	Email:

Name of the service/program you wish to provide: \_\_\_\_\_

Amount of funding requested: \_\_\_\_\_

Organization Mission Statement: (250 words max.)

Please attach the following documents:

- Detailed description of service/program to be provided and the intended impact on the community.
- Details of how the service/program provided will satisfy a community need and the targeted demographic.
- Criteria that you will use to measure success of your service/program in the community.
- Details of how your service/program currently works in collaboration with existing services/programs.
- If you are not currently collaborating, in what ways could your service/program work to do so.
- Budget for current and next fiscal year.
- Two most recent 990 forms
- Proof of valid 501c status.
- All special licenses and/or certifications required to provide intended service/program.
- Listing of all organization officers and Board members.
- List of any previous funding awarded by the Town of New Milford and the success and status of same.
- List of other existing or potential funding sources for the fiscal year of your proposal.
- Include the Non Discrimination and Anti -terrorism Completed forms.

Please note: As part of the review process, you will be called upon to present and provide details of your program to the Town Council. All funding will be awarded after a final review by the Town of New Milford. The application review process will be thorough, and preference will be afforded to applicants who meet the above requirements.

**Incomplete applications will *not* be considered. Deadline for receipt of application is February 1, 2024.**

Executive Director: \_\_\_\_\_ Date: \_\_\_\_\_

*Please print name:* \_\_\_\_\_

Board President: \_\_\_\_\_ Date: \_\_\_\_\_

*Please print name:* \_\_\_\_\_