



American Rescue Plan Act (ARPA)

Grant Application for Nonprofits

GRANT OVERVIEW

This grant is designed to assist Nonprofits in their efforts to support the York County community. This grant is a project-specific reimbursable grant program. Eligible Nonprofit organizations may apply for a one-time award of up to \$5,000 from York County. Grants will be accepted beginning July 25, 2022, and application review will begin on August 15, 2022. Grants will be distributed based on eligibility until all funding is disbursed. Organizations must complete a grant application and submit supporting documentation for consideration. The Grants Committee will review requests and award grants based on the submissions that they feel will have the greatest impact on York County. Additional details are below and in the grant application.

GRANT AWARD

- One-time only grant award of up to \$5,000.
- Reimbursable grant program.
- Due to the nature of this grant program, grant awardees will be required to submit all receipts for reimbursement at the time of the award notification.

REQUIREMENTS FOR ELIGIBILITY

Nonprofits are eligible to apply if it meets all of the requirements listed:

1. Must be an active State of Virginia registered Nonprofit 501(c)(3).
2. Must have been in operation for at least three years.
3. Must provide direct services to the York County community.

ELIGIBLE EXPENDITURE EXAMPLES

The grant recipient can use the funds for expenses directly related to improving their organization.

Expenses include, but not limited to:

- Increasing technology capacity to enable alternative work forms
- Creating new marketing campaigns
- Revising organizational plans
- Paying vendor invoices
- Technical assistance, counseling, or other services to support organizational planning
- Services provided to the community



APPLICATION PROCESS

- Applications must be completed in full and must include a 501(c)(3) Letter of Determination. Incomplete applications will not be considered.
- Applications will be reviewed by the Community Services Grants Advisory Committee to determine awardees.
- The grant application is a public document and the names of the organizations awarded funds may be made public once funds are disbursed.
- Applicants must use the online application or download a PDF form available ([link](#)). The completed form and supporting materials/attachments must be returned to the Budget Office, P.O. Box 532, Yorktown VA 23690-0532. Electronic submissions are strongly encouraged and can be sent to the email address listed below. If you have any questions, please contact Amy Holland at (757) 890-3733 or amy.holland@yorkcounty.gov.



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Please return this completed form and any supporting material/attachments to the Budget Office, P.O. Box 532, Yorktown VA 23690-0532. Electronic submissions are strongly encouraged and can be sent to the email address listed below. If you have any questions, please contact Amy Holland at (757) 890-3733 or amy.holland@yorkcountv.gov

Please complete **ALL** 3 sections of the application form.

Section A: Agency and Contact Information.....	page 1
Section B: Program Information.....	page 2
Section C: Program Funding Information.....	page 3

Section A: Agency and Contact Information

Organization/Agency Name

Federal ID#

Executive Director

Mailing Address

Agency Contact and Phone #

Email Address

Website Address

Section B: FY2023 Program Information

Program Details

Which category listed below best describes your program?

Basic Needs:

- Housing
- Health Care
- Food & Shelter

Natural Resources & Environment:

- Water Quality
- Air Quality
- Other _____

Economic Development:

- Job Growth
- Educational Attainment
- Business Development

Human Services:

- Mental Health Care
- Social Services Related

Recreation & Tourism:

- Supports the Arts
- Tourism Related

Other: (Please specify)

- _____

Briefly describe your program and all of the benefits that it provides/will provide to York County residents
(Please attach a separate page if more room is needed):

Specific Use for funding being requested: _____

Beneficiaries & Outcomes

Beneficiaries

	FY21 Actuals (7/1/20 – 6/30/21)	FY22 Estimated (7/1/21 – 6/30/22)	FY23 Projected (7/1/22 – 6/30/23)
1. Total number served through this program.			
2. Number of York County residents served.			
3. Dollar amount of services provided to York County residents.			
4. Number of volunteer hours provided to assist York County residents.			

Outcomes

List the top THREE ways that your program benefits the residents of York County for the time frames listed below:

- 1.
- 2.
- 3.

Frequency of services provided (please check one) Single _____ Multiple _____

Section C: FY2023 Program Funding Information

Agency Funding

Total program/service cost: _____

Total FY2023 ARPA Grant funding requested (not to exceed \$5,000) \$ _____

Application Checklist

The documents below must be submitted along with your application

1. Copy of the Agency's **current budget** and **anticipated budget** for the upcoming year. (Revenue and Expenditure) _____
2. Copy of prior year financial statements. _____
3. Copy of IRS determination letter of 501(c)(3) status. _____
4. Current list of Board of Directors, including the locality of residency for each member. _____
5. Current approved by-laws, mission statement and/or charter. _____
6. Organizational Chart. _____

I certify the information listed in this application and its attachments are true and accurate to the best of my knowledge.

Executive Director Signature

Date

For Budget Use Only:

Date Application Received: _____

Account Code(s): _____