Date: December 1, 2023

To:

ALL SOCIAL AGENCIES REQUESTING ELA TOWNSHIP FUNDING

## ELA TOWNSHIP SOCIAL AGENCY FUNDING REQUESTS

The Ela Township Board will continue the current funding policy and form for the 2024-25 social agency grant requests. The Ela Township Board has plans to start the grant review process at the February 28, 2024 Committee of the Whole meeting at 8:30 A.M. All meetings will be held at Ela Town Hall in the lower level board room located at 1155 E. Route 22 in Lake Zurich. You are welcome to attend this meeting to provide information about your organization.

Grant requests are funded on their individual merit as decided by the Board. The Ela Township Board retains the right to modify or discontinue the agreement, if the agency were guilty of any misappropriation of funds, breach of contract, or other defined events.

Funding is intended to assist local agencies and organizations who provide direct social services for Ela Township residents and community services. Ela Township may distribute, up to \$35K, in total grant funding to awarded recipients.

Any further information requested by the Board must be responded to within two weeks of the initial review at the Committee of the Whole meeting. Every attempt will be made to make a Board decision on the grant request by the conclusion of the March Board meeting.

Please submit the attached completed form to the Ela Township office no later than 12:00 noon on Thursday, February 1, 2024 for consideration of 2024-25 funding.

Sincerely,

Gloria M. Palmblad Ela Township Supervisor

Attachment: Ela Township Funding Application (3 pages)

## Ela Township

## $Application \ for \ Funding-2024$

Name of Agency:		
Proof of not-for-profit status: (attach) - Certificate of Good Standing available through Secretary of State.		
Date of Incorporation:		
Main Address:		
Address of site to be used for Ela Township if different:		
Phone number:		
Contact person: Title:		
Mission Statement:		
Amount requested:		
Percent Change from last year:		
Percent of Agency Total Budget:		
Please attach a copy of your budget and return with the completed application. This should include a DETAILED list of incoming revenue (please list separately specific names of grantors and amounts as well as any other sources of income).		
What is the total number of clients served this year?		
What is the total number of Ela Township clients served directly this year?		
What is the total number of direct client hours for Ela Township residents this year?		
How can the above numbers be verified?		

Sa	lary and title of the five highest paid employees:			
1.		Salary	/:	
2.		Salary	/:	
3.		Salary	/:	
4.		Salary	/:	
5.		Salary	/:	
Ha	ave you ever received township funding? If yes, specif	y dates and amo	ounts:	
1.	What is your primary service area? Circle those that apply. Yout	h Adult	Seniors	
	Medical Social Services Drug/Alcohol Educ	cation Con	nmunity Service	
2.	Do you charge for your services? Do you use a	our services? Do you use a sliding fee scale?		
3.	Please explain how charges are determined:			
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4.	Do you refer to or use services from other township agencies? If so, p	please describe:		
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5.	Please give a brief description of your agency:			
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6.	How were the Township funds utilized from the previous funding year	ar? Please spec	ify details:	
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	How would you use Township funds, if awarded? If you are requesting creased service or product that justifies it.	ng an increase i	n funding, describe the	
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8. Do you receive State funding?: Any changes to funding recently?:
9. Please provide the total amount of funding received from other agencies and what percentage that amounts in comparison to your total budget?
10. Please explain any major changes that have occurred in your agency in the past year (i.e., new programs or direction, expansion of program or facility).
11. Describe any new fundraising efforts this year. Please explain.
12. Please indicate local statistics pertaining to the Ela Township area that would support the need in Ela Township for the services you provide.
Under penalty of law, I hereby certify to the best of my knowledge and belief the above information is true, correct and complete.
Signed:
Title:
Date: