The purpose of the CBO Grant Program is to provide beneficiaries with opportunities to plan, develop and implement sustainable projects that will serve the needs of the Doral community.

**CBO Grant**

- The CBO Grant is a competitive grant offered in an annual cycle.
- Applicants are eligible to receive only one (1) CBO Grant award per fiscal year.
- The maximum grant amount is a $5,000 reimbursement per organization/per fiscal year.
- All organizations seeking funding must have a 501(c)(3) or 501(c)(6) status and meet all eligibility criteria.
- The organization must be registered as a not-for-profit corporation with the State of Florida and be in good standing.
- Must have up-to-date City of Doral and Miami-Dade County Occupational License and/or Certificate of Use. If sufficient budgeted grant funds remain after a cycle of Doral-based applicants is awarded, the City Manager may authorize a second cycle allowing non-profit applicants from the surrounding community to apply for support of programs benefiting Doral residents. Applicants must show the comparable municipal and county documents.

**Application**

- At the cycle’s outset, local non-profits are informed via ads, email, social media and web.
- Active non-profits based within Doral may apply for grant funds for projects or programs taking place within Doral or directly benefiting the Doral community.
- The applicant must submit one (1) completed application in digital form by email to the Office of the City Clerk at cityclerk@cityofdoral.com by the deadline date and time. The Grant Cycle opens on Monday, April 6 and all applications must be submitted by Friday, May 8, 2020 at 3:30 p.m.
- Applications are reviewed for completeness and checked against the Grant Application Checklist to ensure that eligibility requirements are met for the organization and program.

**Scoring**

- After the cycle is closed, eligible applications are provided to an evaluation committee.
- The 3-member committee will score the application based on the applicant’s answers about the need for the program in Doral, project implementation, and success measurements.
- Recommended funding will be based on the average scoring of committee members.

**Final Reimbursement Report**

- After the program is completed, the organization must provide a Final Report within 90 days of completion of the project documenting the success of the project and providing financial documents verifying the appropriate use of the grant funds.
- Check requests are generated to reimburse the organization for the approved grant amount associated with implementation of the project.
- Failure to supply a Final Reimbursement Report or to comply with approved uses may result in disqualification from reimbursement.
Please submit grant proposal documents in the following order using all forms provided:

1- **Application Form** (please use form provided). Must be signed by an authorized representative of the organization. (Only one organizational name may be listed throughout the application.)

2- **Executive Project Summary** must be written on your organization’s letterhead. Clearly and briefly summarize your request by including your answers to the following questions. Label your answers “a) – e)” corresponding to the question number
   a. Name of your community based organization, its mission and goals.
   b. Why the program/project is needed in Doral.
   c. Provide narrative detailing program/project, objectives and targeted Doral community, one thousand (1000) words maximum.
   d. How will you measure the success of the program/project?
   e. How much is the total program/project cost and how much of that cost is being requested from the City of Doral (request limited to $5,000)?

3- **Budget form provided in the application package.**

4- **Application Package**
   a. Application Checklist
   b. Application Form
   c. Budget Form

5- **Documentation Required**
   - **501 (c)(3)** organization must submit:
     ✓ The State of Florida Certificate of Incorporation
     ✓ The Federal 501 (c)(3) Determination Letter, and
   - **501 (c)(6)**
     ✓ The State of Florida Certificate of Incorporation and
     ✓ The Federal 501 (c)(6) Determination Letter.
   - **Certificate of Use/Occupational License from City of Doral and County**
   - **Lobbyist Form**

6- **Corporate Financial Information** (Must be attached to the application)
   - Audited Financial Statement from previous fiscal year (unaudited financial statements will be accepted from organizations whose gross receipts are $500,000 or less and total assets are $1,250,000 or less).
   - Internal Revenue Service (IRS) Form 990 for previous fiscal year.

7- **Final Reimbursement Report.** Provide Final Reimbursement Report with financial documents verifying the appropriate use of the grant funds.
Name of Organization: __________________________________________________________________________
Address: __________________________________________________________________________________

City: __________________________ State: __________________________ Country: __________________________ Zip: __________________________

Applicant’s: __________________________________________________________

Name and Title

Telephone #: ______________________ Fax #: __________________________

Email: __________________________________________________________________

Federal Tax Identification: _________________________________________________

Employer I.D. # or Social Security #

What type of Non-Profit Organization (Select only one): □ 501 (c)(3) or 501 (c)(6)

Month/Year of Incorporation: ____________________ Corporation Number: ____________________

Grant Request is for (check only one): □ Project/Program □ Special Event

Request includes (check if applicable): □ City Logo □ City’s Social Media □ Use of Government

Facility □ City Gift Bags, Tokens, etc. □ Other: __________________________________________

□ Waiver of Fee: List: ______________________________________________________________

Frequency (Check only one): □ Single Occurrence □ Annual Occurrence □ other: ______________________

Total Amount of City of Doral CBO funds requested by organization: $____________________________

Total Funds from Outside Sources (attached list of sources) $_______ Total Cost of Project $________________

Project Dates:

Start Date: ___________________________ End Date: ___________________________

Select Category: Community Development □ Education □ Health/Human Services □ Arts & Culture □

Civic Engagement □ Environment □

__________________________ ___________________________

Applicant’s Signature Name (Type or Print)

__________________________ ___________________________

Title Date of Application
City of Doral  
CBO Grant Program  
APPLICATION FOR FINANCIAL SUPPORT FOR NON-PROFIT ORGANIZATIONS  
BENEFITING THE DORAL COMMUNITY

Budget Form

In the budget form below, include all expenses related to the project / program or Special Event for which your organization is requesting to receive grant money.

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Total $
Final Report for Reimbursement

The Final Report for Reimbursement is to be submitted, along with this form, to the Office of the City Clerk no more than ninety (90) days after completion of the program. The Economic Development division will verify the information in the Final Report and inform the applicant if any elements are missing. If the Final Report is complete, the Economic Development division will inform the applicant and process the approved reimbursement. Failure to submit a timely Final Report may disqualify an organization from receiving the reimbursement. If a Final Report cannot be submitted within ninety (90) days after the completion of the approved program or event, the recipient may submit a letter to the City Manager requesting an extension.

Name of the Organization: ____________________________________________________________

Address: __________________________________________________________________________

City: __________________________ State: __________________________ Zip: ______________________

Applicant: __________________________ Title: __________________________

Telephone: __________________________ Email: __________________________

Name of Awarded Project/Program or Special Event: __________________________________________

Date Grant Awarded: __________________________ Amount Awarded: __________________________

Answer each of the following questions pertaining to your awarded program/project on your organization’s letterhead. Fully answer each question and provide back-up where required, including but not limited to: proof of payment for elements of the program approved for reimbursement, photos of the event, sign-in lists (where applicable), brochures, flyers, advertisements and testimonies. Clearly number your answers to correspond with the questions below.

1. Provide a summary of the outcome of the program
2. How successful were the results of the program?
3. What was accomplished with the funding provided by the City of Doral CBO Grant Award?
4. Provide a breakdown of the number of participants and identify how many were Doral residents.
5. Provide a final budget of the total program costs, including but not limited to all costs to be reimbursed by the CBO Grant, such as: purchased materials/supplies/services, organizational salaries paid, funds distributed to beneficiaries of the program, etc. The budget must also identify any other funding used to implement the activity.