

COMMUNITY ENRICHMENT GRANT 2024 APPLICATION



**HILLSBOROUGH COUNTY
SHERIFF'S OFFICE**

CHAD CHRONISTER, SHERIFF

**Hillsborough County Sheriff's Office
Community Outreach Division
10119 Windhorst Road, Tampa, Florida 33619**

HILLSBOROUGH COUNTY SHERIFF'S OFFICE

Community Enrichment Grant

PURPOSE: The purpose of this grant is to support "quality of life" community projects/programs within Hillsborough County, Florida.

EXCLUSIONS: The purchase of capital items, primary and/or supplemental construction projects, compliance reward projects/programs, and projects/programs which are duplicative of those offered by the Hillsborough County Sheriff's Office or other local government are not permitted under this grant.

APPLICATION PERIOD: Applications for the 2024 Community Enrichment Grant will be accepted from Friday, April 19 through Sunday, May 19, 2024.

ORGANIZATION APPLICANT: The organization applicant must be a current board member or officer for the organization and on record with the Florida Department of State or other governmental agency if incorporated outside of Florida.

SUBMISSION: Grant applications must be typewritten, accompanied by all required supporting documents, and received within the specified application period.

Email submission is preferred.

Send completed applications to:
communityevents@hcsso.tampa.fl.us

Mailing Address:

Hillsborough County Sheriff's Office
Community Outreach Division - CEG 2024
10119 Windhorst Road
Tampa, Florida 33619

SUPPORTING DOCUMENT(S): Supporting document(s) may be attached to the 2024 grant application. Each document must reference, in the upper right hand corner, the organization's name and employer identification number.

2023 GRANT AWARDS: Organizations who received a 2023 Community Enrichment Grant must provide, as part of this application, expenditure receipts for the 2023 grant award.

IRS Form W-9: A completed IRS Form W-9 must be submitted as part of this application. Use version IRS Form W-9 Revised March 2024.

INTERNAL REVENUE SERVICE DESIGNATION AS CHARITABLE ORGANIZATION: Organizations applying for the 2024 Community Enrichment Grant must be designated by the Internal Revenue Service as a tax-exempt charitable organization, 501(c)3 or other similar designation. A copy of the organization's designation/status letter must accompany the grant application.

The Internal Revenue Service does not require specified organizations, such as religious organizations, to apply for and obtain tax-exempt status. However, the Internal Revenue Service recommends specified organizations apply for and obtain tax-exempt status.

For the purpose of the 2024 Community Enrichment Grant, all organizations must have obtained tax-exempt status from the Internal Revenue Service.

INCOMPLETE APPLICATION: Grant applications classified as "incomplete" will not be considered. Organizations must resolve the "incomplete" status on or before the grant submission deadline.

The organization has the exclusive responsibility to provide all document(s) as required by the 2024 grant application and those which may be requested.

VAGUE PROJECT DESCRIPTION: Organizations are encouraged to provide a detailed project/program description. Grant applications whose project/program descriptions are vague in nature, will be classified as "incomplete". In these cases, the organization will be notified and afforded the opportunity to provide greater specificity, which is due on or before the grant submission deadline.

GRANT PRESENTATION(S): In person presentations are not permitted. Organizations are encouraged to provide all relevant and compelling materials as part of their grant application. A digital accompaniment for review is permitted and should not exceed three (3) minutes in total length.

QUESTIONS: Questions concerning the 2024 Community Enrichment Grant should be directed to the Community Outreach Division via email at communityevents@hcsso.tampa.fl.us

HILLSBOROUGH COUNTY SHERIFF'S OFFICE

Community Enrichment Grant

ORGANIZATION				
LEGAL NAME OF ORGANIZATION		DOING BUSINESS AS D/B/A		
INTERNAL REVENUE SERVICE TAX/EMPLOYER IDENTIFICATION NUMBER		INTERNAL REVENUE SERVICE CHARITABLE ORGANIZATION TYPE		
STATE OF INCORPORATION		LEGAL NAME OF CENTRAL ORGANIZATION (IF APPLYING AS SUBORDINATE)		
ORGANIZATION'S MAILING ADDRESS		SUITE	CITY	STATE ZIP CODE (ZIP+4)
ORGANIZATION'S MISSION STATEMENT				
ORGANIZATION APPLICANT				
ORGANIZATION APPLICANT (BOARD MEMBER OR OFFICER)		TELEPHONE NUMBER		EMAIL ADDRESS
MAILING ADDRESS <input type="checkbox"/> SAME AS ORGANIZATION'S MAILING ADDRESS		SUITE	CITY	STATE ZIP CODE (ZIP+4)
CONTACT PERSON				
CONTACT PERSON IF DIFFERENT FROM ORGANIZATION APPLICANT		TELEPHONE NUMBER		EMAIL ADDRESS
MAILING ADDRESS <input type="checkbox"/> SAME AS ORGANIZATION'S MAILING ADDRESS		SUITE	CITY	STATE ZIP CODE (ZIP+4)
PROJECT/PROGRAM INFORMATION				
PROJECT/PROGRAM NAME		PRIMARY SERVICE AREA(S) WITHIN HILLSBOROUGH COUNTY		
PROJECT/PROGRAM PRIMARY AGE DEMOGRAPHIC <input type="checkbox"/> 0-4 <input type="checkbox"/> 5-10 <input type="checkbox"/> 11-15 <input type="checkbox"/> 16-18 <input type="checkbox"/> 19-25 <input type="checkbox"/> 26-35 <input type="checkbox"/> 36-54 <input type="checkbox"/> 55+			PROJECT/PROGRAM IMPLEMENTATION <input type="checkbox"/> FY24Q3 <input type="checkbox"/> FY24Q4 <input type="checkbox"/> FY25Q1 <input type="checkbox"/> FY25Q2	
DETAILED PROJECT/PROGRAM DESCRIPTION				

Continued ~ See Supplemental/Additional Information Section

HILLSBOROUGH COUNTY SHERIFF'S OFFICE

Community Enrichment Grant

PROJECT/PROGRAM BUDGET

PROJECT/PROGRAM BUDGET (LINE ITEM BUDGET: ITEM, DESCRIPTION, QUANTITY, COST PER UNIT, TOTAL).

Continued ~ See Supplemental/Additional Information Section

PRIOR COMMUNITY ENRICHMENT GRANT(S)

HAS THE ORGANIZATION PREVIOUSLY APPLIED FOR A COMMUNITY ENRICHMENT GRANT?

Yes No ~ If yes, which year(s) 2018 2019 2020 2021 2022 2023

WAS THE GRANT APPLICATION AWARDED?

Yes No

***If the organization received a 2023 Community Enrichment Grant, expenditure receipts must be attached to this grant application.**

CERTIFICATION

I hereby certify, the information provided herein is true and accurate.

I understand and acknowledge exclusive responsibility to provide all document(s) as required by this grant application and those additional documents which may be requested. Furthermore, I understand this grant application will not be eligible for review/consideration by the selection committee unless classified as "eligible for consideration".

If a Community Enrichment Grant is awarded, I agree to disburse the appropriated funds for the purpose(s) outlined within this grant application or as modified by the selection committee.

If a Community Enrichment Grant is awarded, I acknowledge and agree that the Hillsborough County Sheriff's Office has full authority to audit all records pertaining to the awarded funds, at any time and without notice.

ORGANIZATION APPLICANT SIGNATURE

DATE

ORGANIZATION APPLICANT PRINTED NAME

TITLE

HILLSBOROUGH COUNTY SHERIFF'S OFFICE

Community Enrichment Grant

SUPPLEMENTAL/ADDITIONAL INFORMATION

2024

HILLSBOROUGH COUNTY SHERIFF'S OFFICE

Community Enrichment Grant

CHECKLIST

Before submitting a 2024 Community Enrichment Grant Application.....

Are all portions of the application complete? For questions not pertaining to your organization, did you indicate such with N/A or not applicable?

Is the application signed by a current board member or officer for the organization who is on record with the Florida Department of State or other governmental agency if incorporated outside of Florida.

Is your organization's name and Federal Tax Identification Number (FEIN) listed on each supporting document in the upper right hand corner?

If your organization received a 2023 Community Enrichment Grant, are the 2023 expenditure receipts attached?

Did you complete and attach Internal Revenue Service Form W-9 (Rev. March 2024)?

Is your organization's Internal Revenue Service 501(c)3 Determination Letter attached?

(A Florida Department of Revenue Consumers Certificate of Exemption is not acceptable.)

APPLICATION PERIOD: Applications for the 2024 Community Enrichment Grant will be accepted, through Tuesday, April 30, 2024 at 5:00pm EST.

INCOMPLETE APPLICATION: Grant applications classified as "incomplete" will not be reviewed. Organizations must resolve the "incomplete" status by Sunday, May 19, 2024 at 5:00pm EST to be eligible for consideration.

The organization has the exclusive responsibility to provide all document(s) as required by the 2024 grant application and those which may be requested.

VAGUE PROJECT DESCRIPTION: Organizations are encouraged to provide a detailed project/program description. Grant applications whose project/program descriptions are vague in nature, will be classified as "incomplete".

QUESTIONS: Questions concerning the 2024 Community Enrichment Grant should be directed to the Community Outreach Division via email at communityevents@hcsso.tampa.fl.us

SUBMISSION: Grant applications must be typewritten, accompanied by all required supporting documents, and received within the specified application period.

Email submission is preferred.

Send completed applications to:

communityevents@hcsso.tampa.fl.us

Email receipt confirmation will be provided for all applications submitted via email.

Mailing Address:

Hillsborough County Sheriff's Office
Community Outreach Division - 2024 CEG
10119 Windhorst Road
Tampa, Florida 33619