

The Springs Close Foundation, Inc. serves to continue Colonel Springs' legacy of giving back to the communities where Springs Mills plants were originally located. The Foundation has created three new Community Boards - one each in Chester, Lancaster and York Counties - to connect more closely with the communities it serves and better understand the needs and solutions that exist in each county.

The Community Boards are responsible for the bulk of the grant making activity in each county; reviewing all grant applications, conducting site visits and making the final grant decisions in their respective counties. Organizations or programs serving multiple counties will be evaluated by the TSCF Executive Committee at the Foundation's main office.

Guidelines for Early Childhood and Basic Critical Needs Grants

Currently, the Foundation is considering grant requests from eligible nonprofit organizations that:

- Address early childhood issues (birth to age five)
- Effectively deliver support for basic critical needs including, but not limited to, food, shelter and medical assistance

Policies and Interests:

- Grant applications are received and reviewed by either the appropriate Community Board or by the Foundation's main office.
- Deadlines for submission of large grant requests are March 1 for the spring Board Meeting and October 1 for the fall Board Meeting.
- Small requests of up to \$2,500 are considered upon receipt.
- Grants are made only to organizations that are tax-exempt under section 501(c)(3) of the Internal Revenue Code. No grants are made to individuals.
- Grants are often awarded on a matching basis with other foundations and/or the sponsoring agencies.

The Foundation follows a philosophy that resources are here to assist community groups and agencies with programs and projects that will contribute the most to improving the quality of life for the people in its service area. The Springs Close Foundation and its Community Boards will often share knowledge and experience that may expand the design of a particular program.

Funds are never adequate to meet all the identified needs in the area and the Foundation must carefully set its priorities. Each need will continue to be evaluated on its own merit and weighed against other requests.

Further inquiries or requests for information should be directed to:
Angela McCrae, President
The Springs Close Foundation, Inc.

Application Procedure

1. To obtain the application and guidelines, interested candidates may download an application from our website (www.springsfnd.org), pick up an application from the Foundation office during regular business hours or call the Foundation office to request that a packet be mailed to them.

2. Interested parties should submit the completed application form and all attachments to the Foundation by the deadline noted below. Mail all completed applications to:

Main Office
168 Skipper Street
Fort Mill, SC 29715

Chester Office
P.O. Box 489
106 Gadsden Street
Chester, SC 29706

Lancaster Office
201 Gay Street
Lancaster, SC 29720

3. Each completed proposal will be reviewed by the appropriate Community Board or by the Foundation's main office, and an interview may be scheduled. The Community Boards has final authority for all requests from organizations or programs serving only in that county. The Foundation's Executive Committee has final authority for all multi-county grant requests.

PLEASE NOTE: Applicants are strongly encouraged to contact Angela McCrae, President, to discuss proposals prior to submission.

Application Deadlines for Grant Requests above \$2,500

Completed proposal should be received in the Foundation's office by 5:00 p.m. on the following dates:

Proposal	Board Action
March 1	April
October 1	November

If the deadline falls on a weekend or holiday, the deadline shall be 5:00 p.m. on the next business day. Applications received after the deadline date will be considered in the next grant cycle.

Application Schedule for Grant Requests of \$2,500 or less

The Foundation will consider small grant requests as they are submitted. Complete the application and send with all required attachments to the Foundation's Fort Mill office, or the appropriate Community Foundation office, listed above.

Grantees' Accountability

- In accepting funding grantees will be asked to sign and follow the terms of the grant contract agreement.
- The Foundation or the appropriate Community Board may request a site visit.
- Grantees will be asked to conduct a formal self-evaluation, including a written report at the end of the grant period. Reports may also be required at other times during the grant period.



168 Skipper Street
Fort Mill, SC 29715
(T) 803.548.2002
(F) 803.548.1797
www.springsfnd.org

Application for Early Childhood and Basic Critical Needs Grants

Applying Organization Name: _____

Parent or Sponsoring Organization: _____

Street Address: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

Total Budget of Project: _____

Total Amount Requested from the Foundation: _____

The project for which we are applying will serve people in:

- Chester County Lancaster County York County Multiple Counties

Attachments

- A short statement of purpose, size, history of the applying organization.
- Current year's budget for organization and year to date expenditures - include how much of total budget is spent on salaries.
- Sources of other financial support.
- Project Description - include approximately how many people will be served through this project. Explain why the project/program is classified as Basic Critical Needs or Early Childhood.
- Detailed Budget for Proposed Project - include salaries for people implementing this specific program.
- Three letters of support for the project from individuals familiar with your work.
- List of Board of Trustees.
- Documentation of the organization's tax exempt status or governing legislation. If not available or applicable, please explain.
- IRS Form 990, if applicable.
- Financial statement for the organization's previous year.

Authorization

Executive Director/President

President/Chairman

Print Name & Title

Print Name & Title

Date

Date

Project Budget

Name of Organization: _____

Name of Project: _____

Total Project Cost: _____

Project Revenue:

Existing Funders

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____
- 7) _____
- 8) _____

Potential Funders

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____

Total Revenue: \$ _____

In-Kind Contributions

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____
- 7) _____
- 8) _____

Total In-Kind: \$ _____

Project Expenses:

Personnel, Payroll Taxes, Fringes

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____
- 7) _____
- 8) _____

Materials, Supplies, etc.

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____
- 7) _____

Occupancy, Other

- 1) _____
- 2) _____
- 3) _____
- 4) _____

Equipment, Other Capital

- 1) _____
- 2) _____
- 3) _____
- 4) _____

Total Expenses: \$ _____