



116 Chalan Santo Papa • PM Calvo Bldg. • 116 Chalan Santo Papa, Hagatña, GUAM • (671) 477-9266 • Fax: (671) 477-8308 • Email-
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2020 PAY-LESS MARKETS COMMUNITY FOUNDATION MINI-GRANT APPLICATION GUIDELINES

The PayLess Markets Community Foundation (PMCF) will launch its 2020 MINI-GRANT on August 2, 2019, geared to support local non-profit organizations that are actively working to meet the critical needs of our island community.

- A. PURPOSE:** The Payless Markets Community Foundation focuses on providing opportunities for community organizations to better serve the residents of Guam. This year, the Foundation will offer grant funding to eligible local organizations whose aim is to improve the quality of life on Guam by addressing significant gaps in any of the following three **health-related areas**:
- **Building a Healthy Community:** The Foundation supports programs targeted on planning, designing, and building healthy environments in our community that foster greater health equity and provide healthy opportunities for everyone.
 - **Disease Prevention and Health Promotion:** The Foundation supports programs which will help our community identify critical gaps in health, and advance policy and system changes aimed at preventing illness and increasing opportunity for better health for all.
 - **Health Disparities:** The Foundation supports programs that help identify and address health disparities, including race, ethnicity, and socioeconomic status, so that everyone has an equal opportunity to pursue a healthy life.
- B. CONTRIBUTIONS:** Funding for the grant is contingent upon the monies raised through the 24th Annual PayLess Kick the Fat 5K Run/Walk & Community Fair on **Saturday, January 25, 2020**. The PMCF will be accepting mini-grant proposals for review at the Payless Corporate Office beginning August, 2, 2019.
- C. DEADLINES/TIMELINES:** The mini-grant application process will officially commence on Friday, August 2, 2019. Proposals must be hand delivered to the Pay-Less Corporate Office in Hagatña or mailed to the Pay-Less Markets Community Foundation. The deadline for proposal submission will be **Friday, September 6, 2019 at 4:00 p.m.** Only **complete** applications (see checklist) will be processed and reviewed. The PMCF Mini-Grant committee will review all complete applications. Applicants are notified of final decisions usually within 30 days of deadline. **If awarded, funds should be encumbered within twelve months upon receipt of funds.**
- D. ELIGIBILITY CRITERIA:** Local non-profit and charitable community-based

organizations which have been in existence for more than two years are eligible to apply. Partnerships with other nonprofit agencies, service clubs, neighborhood networks, and/or government programs are encouraged. Applicants may apply for **up to \$5,000.00** to fund a particular project of the organization that addresses any significant gaps in one of the three health-related areas mentioned above. Applicant may only propose work that will serve or benefit Guam residents. Funds **may not be used for** the following:

- Lobbying
- Scholarships
- Operational costs
- Deficit financing
- Fundraising

E. **APPLICATIONCHECKLIST:** Your mini-grant proposal must contain the following information to be considered complete:

1. PMCF Mini-Grant Submittal Form – completed and signed
2. Department of Revenue & Tax non-profit certificate and/or IRS letter of determination for 501(c)3 tax exemption

****STOP – IF THE ABOVE ITEMS ARE NOT COMPLETE THEN PMCF WILL NOT REVIEW THE REST OF THE APPLICATION****

3. Organization's Narrative of no more than four (4) pages that includes:
 - Organizational Background
 - Description of Project
 - Timeline for Implementation
 - Budget and Justification NarrativeSee description below for each area.
4. Submit one copy of the mini-grant application form and the narrative to:
ATTN: KTF Mini-Grant PayLess Markets Community Foundation 116 W Chalan Santo
Papa PM Calvo Building Hagatna, GU 96910

F. **REVIEW AND APPROVAL PROCESS (no more than 4 pages):**

• **Organization Background (20 points)**

The Organization Description and History section should include: how the organization's mission aligns with PMCF's mission; previous experience in managing grant funding; organizational background that demonstrates ability to carry out the proposed project.

• **Description of Project (35 points)**

The Description of Project should include: description of project that is feasible and realistic; organization's ability to manage the project; target audience; improvements, support or assistance that benefits Guam residents; serves a critical need or fills a gap in the community in the area of health; tasks, methods of implementation and resources; and additional community resources to support activity.

• **Timeline for Implementation (10 points)**

The Timeline for Implementation should be realistic and include tasks, proposed dates, activities, and scope of work; and should be completed within one year.

• **Budget and Justification Narrative (35 points)**

The Budget and Justification Narrative should include: how the funds address health-related issues in our community; detailed amounts (less than \$5,000) to complete project; narrative clearly explains use of funds; realistic and cost-effective budget; administrative costs that do not exceed 15% of total funds requested; and quotes for necessary items/services.

G. **SUMMARY REPORT:** Upon receipt of grant funding, a summary report must be provided within the

first year to include narrative of progress on the use of funds, detailed budget, and any challenges and successes. Request to use any excess funds must be approved by the PMCF board otherwise returned to the Foundation.

- H. DISCLAIMER:** PMCF reserves the right to request revisions to the budget and/or scope of work of any applicant. The PMCF logo must be used on materials obtained through Foundation mini-grant funds. If you have any questions or concerns please email foundation@paylessmarkets.com or call Kameran Pereira at 477-9266.



PAYLESS MARKETS COMMUNITY FOUNDATION MINI GRANT APPLICATION FORM

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APPLICANT INFORMATION

Name of Organization: _____

Mailing Address of Organization:

Street: _____

Village: _____, GUAM Zip Code: _____

Authorized Official Contact Person: First Name: _____

Middle Initial: _____ Last Name: _____

Signature: _____ Date: _____

Phone Number: (Work) _____ (Mobile) _____

Fax Number: _____

Email Address: _____

Mailing Address:

Street: _____

Village: _____, GUAM Zip Code: _____

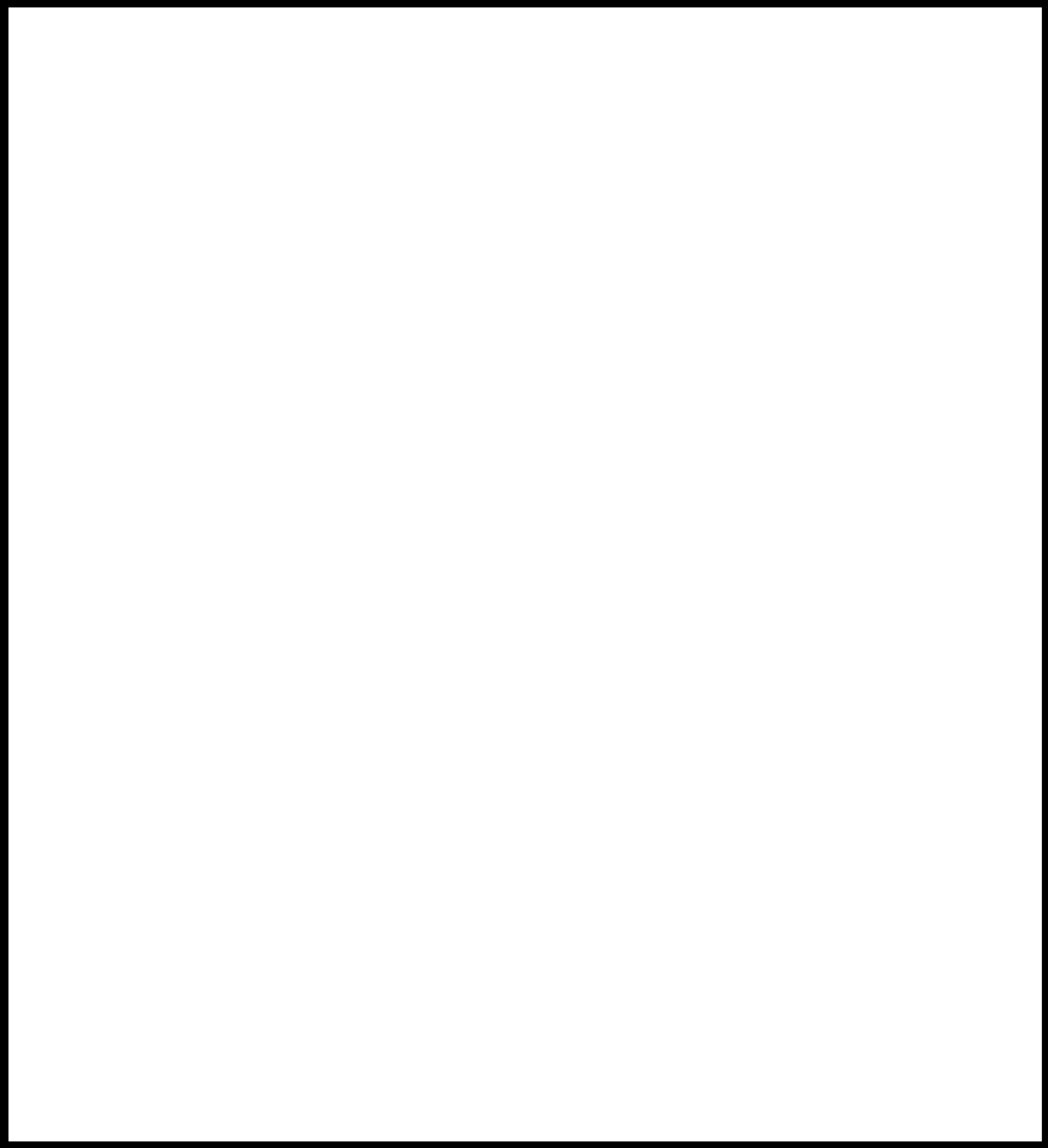
(Please check the box below to acknowledge project completion provision.)

Applicant agrees to provide summary report upon completion of project.

ORGANIZATIONAL BACKGROUND- (20 points)

(In line with PMCF Mission)

DESCRIPTION OF ACTIVITY AND TARGET POPULATION (35 points)



TIMELINE FOR IMPLEMENTATION- (10 points)

(Within One Year from Award Date)

BUDGET and BUDGET NARRATIVE- (35 points)

TOTAL REQUESTED AMOUNT: _____

FUND START DATE: _____

FUNDS END DATE: _____