

**PLEASE READ THIS IMPORTANT INFORMATION CAREFULLY**



## **SILETZ TRIBAL CHARITABLE CONTRIBUTION FUND TERMS AND CONDITIONS**

By completing, signing and submitting the application form, the Contact Person for the organization hereby assures and certifies that it will comply with Siletz Tribal Charitable Contribution Fund (STCCF) regulations and guidelines as stated in the grant application. The Contact Person for the organization also assures that:

1. It possesses the legal authority to apply for a grant.
2. It will fulfill, to the greatest extent possible, all project tasks, goals, objectives, and expenditures stated in the award letter.
3. STCCF Funds may not be expended for any other purpose without the prior written approval of the STCCF Advisory Board. Any funds not expended for the purposes of the approved grant during the grant term of one year must immediately be returned to STCCF.
4. The grantee must provide an annual evaluation report within one year of receipt of funds concerning the use of the grant funds including (1) a narrative account of what was accomplished by the expenditure of funds, (2) a detailed accounting of the expenditures and (3) photos of the activity.
5. Any copies of original publications directly resulting from the grant must be provided to STCCF.
6. STCCF may withhold further consideration of grant applications from the organization in the event that a report is not received in a timely manner, and may terminate the grant if the report is not received.
7. The grantee organization shall make reasonable efforts to publish and announce the award in a local media outlet. Documentation must be provided with the evaluation. Grantees are encouraged to acknowledge the support of STCCF for their organization and to include the name "Siletz Tribal Charitable Contribution Fund", on any printed and visual materials produced as a result of the grant.
8. All awarded organizations are required to attend the Distribution Reception to personally accept the awarded funds. Light refreshments will be available.
9. All awarded funds must be spent within one year of the receipt date. Request to use unexpended funds beyond the one year date must be submitted to the for review and approval. No unexpended funds may be expended without the prior written approval STCCF.
10. Any violation of the foregoing conditions will require the refund to STCCF of any and all amounts subject to the violation.

## GRANT RECIPIENT RESPONSIBILITIES

The Siletz Tribal Charitable Contribution Fund grant recipient organization must:

1. Carry out all objectives and tasks as outlined in Siletz Tribal Charitable Contribution application; to deviate from the stated objectives, a written request must be submitted to the STCCF Advisory Board for review and approval.
2. Disburse all STCCF funds in accordance with the approved budget submitted with the application and stated in the award letter. No deviation in the use of grant funds is permitted without prior written consent from the STCCF Advisory Board.
3. Abide by all STCCF Terms and Conditions.
4. Acknowledge STCCF grant support on all public documents, press materials and public statements.
5. Photographs are REQUIRED to be submitted with the evaluation form. These should include photographs of the activity awarded. If equipment was awarded then photographs of that equipment, preferably in use, should be provided.
6. STCCF encourages a GREEN process. Thank you letters are not required. If you send a thank you letter we encourage you to send it via email instead of mailing hard copies. This is not a requirement, just a recommendation.

Non-compliance with any of the above responsibilities may result in the suspension or revocation of Siletz Tribal Charitable Contribution grant funds and may render the organization ineligible for future grants.

Before submitting an application, please remember these important notes:

- A complete grant application on the approved form is REQUIRED for consideration.
- Do not use report covers, binders or folders of any kind.
- Please do not send video tapes, DVDs, CD-ROMs, books, etc.
- Postmark dates are not considered. Applications received after a deadline may be deferred to the next review cycle. Applicants are encouraged to submit applications early. Project dates must not occur prior to distribution of funds.
- Confirmation to the applicant will be sent via email to the contact person. If no email address is provided a postcard will be postal mailed to the address on the application.
- The length of the review process is at least 30 days.
- Grant funds are not awarded for past expenditures. Please plan your project and application accordingly.
- Save a copy of the application for your files before submitting the original via postal mail or email.

Frequently Asked Questions (FAQs) can be found at  
[www.ctsi.nsn.us/charitable-contribution-fund](http://www.ctsi.nsn.us/charitable-contribution-fund)

# HOW TO APPLY FOR SILETZ TRIBAL CHARITABLE CONTRIBUTION FUNDS

The Confederated Tribes of Siletz Indians of Oregon (Siletz Tribe) enacted Ordinance Section 4.20, Distribution of Net Revenues Ordinances on July 6, 1999. Additionally, Siletz Tribes and the State of Oregon signed a Memorandum of Understanding (MOU) on September 4, 1999. Through these two documents, the Charitable Contributions program and Advisory Board were created. The Advisory Board consists of seven individuals meeting quarterly to review and recommend applications. They are also responsible for the solicitation and statistics related to the distribution of funds.

## ELIGIBILITY

Charitable Contributions are awarded to charitable organizations or local governments within the Siletz Tribe's service area and/or Native American entities or activities located anywhere in the United States.

Eligible Oregon Counties include:

- Benton
- Clackamas
- Lane
- Lincoln
- Linn
- Marion
- Multnomah
- Polk
- Tillamook
- Washington
- Yamhill

Native Organizations located throughout the United States outside the designated Oregon counties are also eligible to apply for funding if they are providing services or activities to a population containing more than 50% Native American for the applied for project. You must describe on the application how you meet these eligibility criteria.

The Charitable Contribution Fund has designated twelve allowable categories including:

- Alcohol & Drug Treatment
- Arts
- Cultural Activities
- Education
- Environment & Natural Resource Preservation
- Gambling Addiction
- Health
- Historical Preservation
- Housing
- Prevention
- Public Safety
- Other

**PLEASE READ AND CONSIDER  
THE FOLLOWING IMPORTANT INFORMATION BEFORE APPLYING**

Organizations located within the eleven eligible counties and/or Native American Organizations located throughout the United States are eligible to apply. Individuals are not eligible to apply for funding. Non-profit status is not required to be considered for a grant.

STCCF fund is intended to provide funding for assistance or expansion to current organizational funding; it is not intended to be a substitute for existing funding, fundraising activities or pilot projects.

Due to the amount of funding available for distribution in 2011 and 2012 grants over \$15,000 are not encouraged.

The STCCF Advisory Board generally considers projects that provide the largest benefit to a community or population and have additional funding sources.

Expenditures such as operating expenses (salaries, administrative expenses, membership dues,) are generally not considered for funding.

Please note that most successful applications demonstrate a high ratio of confirmed matching funds. Matching funds may include cash, in-kind or fundraising.

The review process takes at least 30 days with notice being provided to each applicant at least one week prior to the Public Reception. Notification regarding the decision will be delivered by postal mail. Please do not call regarding the status of your organizations application.

**HOW TO APPLY**

Download the current application. All requests for funds must be submitted on the approved form provided at [www.ctsi.nsn.us/Charitable-Contribution-Fund](http://www.ctsi.nsn.us/Charitable-Contribution-Fund). Applications are provided only in Word format.

Applications must be completed entirely to be considered by the Advisory Board.

It is highly recommended that all information be provided within the application. You may not state "see attached" in the application. Up to two single sided attachments are allowed only if additional space is needed.

Cover letters and cover sheets are **NOT** allowed. If your application is submitted with a cover letter or cover sheet it will be returned to you for resubmission.

Applications may be submitted via email to [stccf@live.com](mailto:stccf@live.com) or by US Postal mail. All applications must be received by 4:30pm on the published due date. No postmarked applications will be accepted and late applications may be considered in the next quarters review.

## **STEP BY STEP INSTRUCTIONS FOR COMPLETING THE APPLICATION**

Applicant Information: Complete all sections regarding your organization.

Contact Person: Please provide name, phone number and E-mail for an individual that may be contacted with questions regarding your organization and/or application. This does not have to be the President, Executive Director, etc. It should be the person that is knowledgeable about the program and the application content.

Mailing Address: Provide information where your organization can receive US Postal mail. Notice of the results will be mailed a hard copy to the address provided. Proposed dates of notification are included in the Due Dates. For example: schools applying for funds in June will be notified the end of July. Please remember to provide a mailing address where the contact person will receive the notification timely.

County: Select one of the eleven counties's where the organization is located. Native organizations will leave this blank and just check the "outside the service area" and answer the "Type of Organization" section.

Type of Organization: If selecting Native American Organization you must briefly describe how your organization meets these eligibility criteria.

Make Check Payable to: indicate the name that will be provided on the check if funds are awarded. This should be limited to 35 characters.

### **PROJECT INFORMATION**

How many will benefit from the proposed project? Please provide an estimate of the total participation that will benefit from the project. You will be asked to provide actual numbers on the final evaluation form including a breakdown by ethnicity. If you are applying for services that will impact an entire community, include the population statistics for that community. Population statistics for States, Counties and Cities can be located at the US Census Bureau: [www.quickfacts.census.gov/qfd/states](http://www.quickfacts.census.gov/qfd/states).

Proposed date of Activity: You must complete this question. This date cannot occur prior to the distribution of awards.

Grant Category: Please select only one category that you feel best represents your organization or event. The category is used for reporting purposes only. It is not used in selection of awardees. If you are unsure about which category to select, you can leave it blank or contact us and we can assist you in selecting an appropriate category.

- Some activities have been designated to particular categories:
  - Soup Kitchens, Food Share, Meal Delivery, Etc. is a "Health" category
  - Youth sports activities are considered "Prevention."

### **PROJECT SUMMARY**

Briefly summarize, preferably with 3-4 sentences, the purpose of this request. Include what will be done, where, for whom and when.

## **CAPACITY & PROGRAM SUSTAINABILITY**

If the proposed project is not an ongoing program, please select the box. If funding is requested for an ongoing program, please provide information to demonstrate the organizations ability to manage and report the grant funds, complete the proposed project and sustain the program beyond the term of the grant. Include the life of equipment and collaborations and partnerships related to the project if applicable.

### **GOALS AND OUTCOMES**

Describe three primary goals of your organization, demonstrating how the proposed project will address these goals.

### **PROJECT DESCRIPTION**

This is one of the most important sections of the entire application. Provide in one page or less, specifics regarding the project including how the funds will be used. Please include only information that creates a better understanding of the project and how it corresponds to the grant application. It is recommended that a summarized purpose be as detailed as possible. This is your opportunity to describe the needs of your organization and how the awarded funds would be used and benefit your organization. Use this space wisely! It is the "heart" of your grant application.

### **PROPOSED PROJECTED BUDGET**

Total Matching Funds SECURED to date: Include all funds your organization currently has on hand for this project.

Total Matching Funds PROPOSED: Include all funds your organization proposes to receive for this project. This section can include in-kind, fundraisers, donated materials, services or labor.

Total Funds requested from Siletz Tribal Charitable Fund: This is the amount you are requesting to be funded by the STCCF. Preference is likely to be given to organizations that have other funding sources including fundraising and in-kind to assist with their project.

Total Cost of the Project: Include the total amount needed for your project. This does not include your operating budget unless you are asking for operating expenses. This should only include the amount for the project you are proposing to use STCCF funds for.

### **Summary of Secured or Outstanding Matching Funds**

Funding Source: List of all sources of funds such as other program funds, other grant agencies/organizations funding, in-kind, fundraisers, etc.

Indicate Secured or Proposed: Please list for each funding source.

Amount: Indicate amount for each funding source.

If proposed, expected decision date: Include month and year of proposed receipt of outstanding funding sources.

If no other sources of cash, in-kind or fundraising are being solicited for this project, please explain why: Preferences is likely to be given to organizations that have other funding sources including fundraising and in-kind to assist with their projects.

### **DETAILED PROJECT BUDGET**

NOTE: Due to the amount of funding available for distribution in 2012 grants over \$15,000 are not encouraged.

Budget Items: Include list of items needed for project. Please include quantities and cost per item when applicable.

Requested STCCF Fund: Indicate the amount of funds used for the Budget Item from STCCF Funds.

Applicants Share – Secured: Indicate the amount of funds the organization has secured to use for the budget item relating to the specific project.

Applicants Share – Proposed: Indicate the amount of proposed funding the organization will use for the budget item relating to the specific project.

Total Cost: Total rows across for each Budget Items then Total Project Budget on last line for all funds and Total Project Cost. Please ensure that all rows and columns are accurately summed.

### **CERTIFICATION**

We accept applications via email and postal mail. If emailed, we will use the email message as certification of submission.

### **SUBMISSION OF APPLICATION**

Submit the application via E-mail to [stccf@live.com](mailto:stccf@live.com) or by US Postal Mail to the mailing address provided or hand deliver by the due date to the physical address provided. If UPS or FedEx is used please use the physical address provided. All applications must be received by 4:30pm on the due date. No postmarked applications will be accepted.