Purpose. The purpose of this program is to provide economic support for activities and initiatives that encourage economic development and enhance the quality of life in our community.

Eligibility. Applicants must be volunteer-based, non-profit organizations, located in and serving Jefferson County. To be eligible, the applicant must demonstrate the activity for which funding is sought will:

1. Increase economic activity in the county; and/or
2. Improve and promote the county’s image and, thereby, enhance the prospect for increased economic activity in the future.

The maximum award available through the Small Grant Program is $1500. This amount may be adjusted by the County, based on budgetary considerations.

One application per organization, per six month period will be considered; October 1 - March 31 is the first application period, April 1 - September 30 is the second application period. *An organization submitting one application during the fiscal year can submit the application at anytime during the year, Jefferson County's fiscal year is from October 1 through September 30. The County will not consider applications from cemetery associations, veterans’ or labor organizations, religious groups or fraternal organizations. Social and/or civic organizations may be eligible, depending on the nature of the request.

How to Apply. Application forms are available in the County Coordinator’s Office or online at www.jeffersoncountyfl.gov. Completed applications should be forwarded to:

County Coordinator’s Office
1 Courthouse Circle
Monticello, Florida 32344

Additional instructions and timelines are contained in the application. All questions regarding the process should be directed to Parrish Barwick at 850-342-0287 or pbarwick@jeffersoncountyfl.gov. Notice of BOCC support will be placed on ads or banners using the Jefferson County Logo, Statement of BOCC support, or other approved form.

Evaluation. Proposals will be evaluated by the Small Grant Review Committee which shall consist of the Executive Directors of the Economic Development Council, Tourist Development Council and Chamber of Commerce; also Mrs.Kimberly Allbritton, Jefferson County Health Department Administrator and the County Coordinator. The Committee’s nonbinding recommendations will be submitted to the Board of County Commissioners for final approval and notification of awards. The following criteria will be used to evaluate grant proposals:

- Does the proposal respond to a demonstrated or emerging community need
- Is the project tied to economic development
- Will existing and/or additional volunteer and fundraising efforts be used as leverage to promote the project
- Are matching funds available
- Does the proposal offer a plan for financial sustainability without continued grant assistance
- Does the applicant have the demonstrated ability to implement the project
- Does the applicant receive public financial support
SMALL GRANT PROGRAM

APPLICATION

Thank you for your interest in Jefferson County’s Small Grant Program. Our goal is to provide support for activities and initiatives that encourage economic development and enhance the quality of life in our community.

Please complete this application (typewritten applications are preferred) and return it to the County Coordinator’s office at least 60 days prior to the date on which the funds are needed, along with agreement to promote Jefferson County BOCC.

The process for evaluation of applications is as follows:

1. Within 30 days of receipt of a completed application, the Small Grant Program Review Committee will meet to evaluate the application. This meeting will be advertised and open to the public. You will be personally notified of the meeting and invited to have an open discussion with the Committee regarding your project. This will be the only forum in which your application will be discussed.

2. The Committee’s evaluation and recommendation will be forwarded to the Board of County Commissioners and placed on the Consent Agenda for the next available meeting (but no later than 30 days following the Review Committee’s meeting). You will receive notice of the meeting. However, there will be no further input or discussion and the Board will either accept or reject the Committee’s recommendation.

3. The County Coordinator will notify applicants of the County Commission’s decision regarding the grant request.

4. If your funding request is granted, you are required to submit a report outlining the development, implementation and overall assessment of the project or event. Please provide as many details as possible to assist the Review Committee and County Commission in evaluating the impact of the project or event. This report should be submitted to the County Coordinator’s office no later than 30 days following the completion of the project or event.

Project name:______________________________________________________

Organization name:_________________________________________________

Type of organization (charitable, 501(c)(3), etc.__________________________
Name, address, telephone number and
e-mail address of primary contact: ______________________________
____________________________
____________________________
____________________________

Please describe how the project meets the criteria established for this program. You may create your own narrative or respond by answering the questions below. Please limit your narrative or responses to one page and attach it to this application.

- How does the project respond to a demonstrated or emerging community need?
- What product or service will be rendered as a result of receiving funding?
- Is the project tied to economic development?
- How will the project be implemented?
- Are volunteer services and fundraising efforts being used as leverage to implement the project?
- Is the project currently receiving public funding from other sources?
- Are matching funds available?
- How will project be sustained when the requested funds are exhausted?

Amount of funds requested: $___________

Anticipated project completion date:___________

________________________________________
Signature of Applicant

________________________________________
Title

________________________________________
Date

Logo to be used as BOCC notice.