



Holiday Funding Partnership Grant Program

Humboldt Area Foundation, Humboldt Health Foundation, Mel & Grace McLean Foundation, Smullin Foundation, St. Joseph Health Humboldt County

Program Information & Eligibility

The Holiday Funding Partnership offers small grants of up to \$2,000 to assist schools, nonprofits, and faith based organizations with holiday assistance programs offered between **November 15 and January 1**. The amount funded for each project will be determined by the nature of the project, number of people that will be served, and the amount requested. The spirit of this grant is to inspire and support all of the activities that make holiday programs in our communities a success. We seek to enhance what has already been accomplished prior to this grant. Our committee of funding partners and community volunteers will consider each application and prioritize funding based on the following criteria:

- Serves youth, seniors, and low income families
- Provides food boxes, food vouchers, grocery credit, or community meals
- Provides clothing and/or other basic needs
- Serves Humboldt County, with an extra priority given to programs that reach underserved or outlying areas
- Lesser priority will be given to programs requesting funding for family activities and small gift items

The following requests will *not* be funded:

- Government agencies, for-profit organizations, and community groups without a fiscal sponsor
- Party decorations
- Venue rental for events
- Craft parties or crafting supplies
- Photographs
- Toys
- Communal meals or gatherings without approval from the Humboldt County Health Officer following COVID-19 safety protocols

Application Information

Applications are being accepted through end of day Tuesday, December 15th, 2020 and may be submitted in the following forms:

- Emailed or postmarked to Grants@HAFoundation.org by end-of-day.

Send applications to: Humboldt Area Foundation
Attn: Holiday Funding Partnership
363 Indianola Road
Bayside, CA 95524

Unfortunately, due to COVID-19, we will not be able to hold our usual celebration to honor the organizations, staff, and volunteers who work to make the holiday season a joyous time for those in need. Instead, checks will be mailed to the address on the grant application.

Questions?

For technical support, please contact Grants & Community Strategies Coordinator Mitra Abidi at 707-267-9916 or grants@hafoundation.org

For questions the program and eligibility, please contact Sara Dronkers, Director of Grantmaking & Nonprofit Resources, at 707-442-2993 or SaraD@hafoundation.org



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Organization Requesting Funding:			
Brief Description of Organization:			
Primary Contact:		Title:	
Mailing Address:			
Phone Number:		Email:	

Who should the public contact to access your holiday assistance program (if different from above)?

Name:		Title:	
Phone:		Address:	

Which of the following best describes your organization?

- A nonprofit organization with 501(c)3 status - EIN:
- A public school, government agency, or Tribal government
- A community group with a qualified nonprofit fiscal sponsor - Fiscal Sponsor's EIN:
- A community group with a qualified public school, government agency, or Tribal government fiscal sponsor

Amount Requested (\$2,000 maximum):

Geographic area your holiday program will serve:

Approximate number of individuals to be served by your holiday program in 2020:

Children (0-5):		Children (6-12):		Youth (13-18):		Adults:		Seniors: (65+)		TOTAL:	
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Please indicate how many of each item below you expect to distribute through your holiday program in 2020:

Clothing:	Children:	Teens:	Adults:
Food Baskets:		Meals:	Toys:
Other (please describe):			

Program Manager:	_____	Committee:	OTH	Fund ID:	HOLID	
Review Date:	_____	Action:	_____	Profile #:	_____	FOR OFFICE USE ONLY
Grant Date:	_____	Amount:	_____	Grant #:	_____	
				Batch #:	HFP20	
Program Area:	<input type="checkbox"/> ANML <input type="checkbox"/> COMM <input type="checkbox"/> ARTS <input type="checkbox"/> ENV <input type="checkbox"/> HEAL <input type="checkbox"/> TA <input type="checkbox"/> YUTH					



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Project Narrative

*Please answer all of the following questions in detail using the space provided below; limit your narration to this page **only**.*

1.) How will funds from a Holiday Funding Partnership grant be spent? Please be as specific as possible:

2.) How will these items be distributed?

3.) What other organizations are you partnering with for this year's holiday program, and how are you collaborating with other programs that are providing similar services in your geographic area?

4.) Do you partner with any programs that provide toys? If so, please list any partners or other resources.



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Project Budget

Please ensure that your budget is filled in completely and that the "Grand Total" reflects the total budget of your holiday program. Please be as specific as possible.

Expense	Amount Requested from HFP	Other Funding Sources		Total Budget
		Amount	Source	
Food Baskets				
Meals				
Clothing				
Toys	-----			
Other:				
Other:				
Other:				
Other:				
Other:				
Other:				
Other:				
Totals			Grand Total	



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Previous Funding

If you received funding from the Holiday Funding Partnership in 2019, please fill out the following:

1.) Briefly describe your 2019 project, including the geographic area(s) served:

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2.) How many individuals were served by your 2019 program?

<i>Children (0-5):</i>		<i>Children (6-12):</i>		<i>Youth (13-18):</i>		<i>Adults:</i>		<i>Seniors: (65+)</i>		TOTAL:	
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Primary Contact:		Title:	
Mailing Address:			
Phone Number:		Email:	

Signature:		
Date:		