

## Resident & Community Support Fund Application

The Resident and Community Support Fund (RCSF) provides financial assistance for wide-ranging needs and projects including resident support, community projects, supplies and pilot programming.

Awards are given in three main categories:

- 1) **Individual-** *Support for individual resident.*
- 2) **Community-** *Support for projects that enhance the quality of life for multiple residents living at communities supported by the Community Life Foundation.*
- 3) **Innovation & Impact-** *Support for Inventive programs that demonstrate potential to help thousands of residents.*

Please fill out the two boxes below with the general information and payment information of your request, then select the grant type and follow the corresponding instructions. Email this application to [grants@shag.org](mailto:grants@shag.org). Applications are due the second to last Wednesday of the month the committee meets.

**Applicant/Project Name:** Click here to enter NAME

**Date of Request:** Click here to enter DATE.

**Dollar Amount of Request:** Click here to enter DOLLAR AMOUNT

*Contingent on review and approval, please provide the payout information below:*

**Check Payable To:** Click here to enter COMPANY/COMMUNITY.

**Mailing Address:** Click here to enter ADDRESS.

**Check Delivery Options:**  Vendor     Community

**\*Please note in some situations requested funds will be paid directly to vendor upon committees' decision. *Please provide vendor's W9 form.***

Please select grant type below and provide supplemental information as requested. All requested signatures required.

<input type="checkbox"/> <b>Individual Grant</b> maximum amount eligible for award: <b>\$1,000</b> <i>It is mandatory for RSC to be aware of this application, and while it will strengthen the request for support, it is not mandatory for direct RSC support and involvement.</i> <i>*Required documents to accompany application include resident ledger from the past three months (if applying for rental assistance)</i>		
<b>Applicant's Monthly Income:</b> Click here to enter MONTHLY INCOME	<b>Applicant's Monthly Rent:</b> Click here to enter MONTHLY RENT	<b>Applicant's Assets:</b> Click here to enter ASSETS
<i>If applying for rental assistance, I have included my unit ledger for the past 3 months:</i> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <i>Have you worked with your community's RSC to fulfill this need?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
<i>Why are you unable to meet this need on your own?</i>		
<i>If any, describe/list other avenues tried for assistance</i>		
<i>How will this need be resolved in the future?</i>		

**Resident Service Coordinator Signature:** \_\_\_\_\_

*If all or partial funds are granted, I hereby agree to provide a statement regarding the impact and benefit of the support from the RCSF, if contacted.*

*If requested, grantee agrees to provide proof/receipt/documentation of procurement of approved item(s).*

**Applicant Signature:** \_\_\_\_\_

**Unit Number:** \_\_\_\_\_

**Community Grant** *maximum amount eligible for award: \$2,500*

*At least three community members including applicant, must sign to indicate their willingness to volunteer on behalf of this project, and Community Manager must sign to indicate support. Please include any cost estimates and/or supporting documents.*

**Please describe the request and indicate its purpose and expected impact.**

**Supporting Resident Signature:** \_\_\_\_\_

**Supporting Resident Signature:** \_\_\_\_\_

*If all or partial requested funds are granted, I hereby agree to provide a statement regarding the impact and benefit of the support from the RCSF, if contacted.*

*If requested, grantee agrees to provide proof/receipt/documentation of procurement of approved item(s).*

**Applicant Signature:** \_\_\_\_\_

**Community Management Signature:** \_\_\_\_\_

**Innovation and Impact Grant** *maximum amount eligible for award: \$5,000*

*Please include any cost estimates and/or supporting documents.*

**Please describe the request and indicate its purpose and expected impact.**

*If all or partial requested funds are granted, I hereby agree to provide a statement regarding the impact and benefit of the support from the RCSF, if contacted.*

*If requested, grantee agrees to provide proof/receipt/documentation of procurement of approved item(s).*

**Applicant Signature:** \_\_\_\_\_

**CLF or Community Staff Signature:** \_\_\_\_\_

**NOTE:** Responsibility for application completion and including any and all additional supporting documents falls on behalf of the applicant. If an application is approved but information is incomplete, the grant may not be eligible for payout until necessary information has been provided.

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**For RCSF use only**

Granted    Modified    Denied

**Reasoning:**

**RCSF Representative Signature:** \_\_\_\_\_

**SHAG CEO Signature:** \_\_\_\_\_