

PARTNERSHIPS for PARKS

CAPACITY FUND APPLICATION COVER SHEET

***Deadlines:** February 1st, June 1st and October 1st*

Name of group: _____

Park: _____

Contact person: _____ Daytime phone: _____

Address: _____ Evening phone: _____

City, State, Zip _____

Is your group a registered 501(c)3 organization? _____

If not, who is your Fiscal Sponsor? _____

How much money is requested? _____

Application Checklist:

- Cover Sheet
- Narrative (2-3 pages; see questions below)
- Budget
- Copy of IRS 501(c)3 status letter or letter from fiscal sponsor
- Attachments, if appropriate (photos, fliers, newspaper articles, etc.)

Mail to:

Partnerships for Parks Capacity Fund
49 Chambers Street, Room 1027
New York, NY 10007
Phone: 212-360-8180
Fax: 212-227-5284



In a narrative of two to three pages, please answer the following questions:

- ◆ What is your group’s mission? How long has your group been involved in your park?
- ◆ What are some of your group’s past achievements?
- ◆ What is your group’s project? Why has your group decided to undertake this project?
- ◆ How will it help expand your group’s ability to care for the park?
- ◆ What is your timeline?
- ◆ What are your project objectives and projected accomplishments?
- ◆ Who is the target audience for this project? Please include partner organizations, volunteers, demographics, etc.
- ◆ Who will be involved in the project?
- ◆ Are there any other actual or potential sources of funding for the project?

PROJECT BUDGET -- Please fill out or attach your own

	Expenditure	Explanation	Cost
Item 1:			
Item 2:			
Item 3:			
Item 4:			
Item 5:			

	Income	Explanation	Amount
Item 1:			
Item 2:			
Item 3:			
Item 4:			
Item 5:			

Total amount requested: _____