

Academic Scholarship Match Application

CITY COUNCIL

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Organization Eligibility Criteria

Nature of Organizations:

- Must be a 501(c) non-profit organization
- Must provide existing services or contributions to Maricopa residents
- Must provide financial proof indicating ability to match funds by February 29, 2016
- Recipient non-profits must submit a report to the City detailing how the matched funds were utilized within 6 months of receipt of funds.

Nature of Scholarship:

- Only students living within Maricopa Unified School District's boundaries are eligible
- Community service, as defined by the non-profit organization, is required for students to be eligible for scholarship
- Scholarship qualifications set forth by the non-profit organizations cannot mandate a program of study

Tentative Application Timeline:

Application Submission Opening Date

Application Submission Closing Date

Application Submission Closing Date

Proof of Funds Available for Match

Approval by City Council

Organization's Letter of Agreement

Check Cut to Awarded Programs

December 14, 2015

January 29, 2016

February 29, 2016

April 5, 2016

April 19, 2016

May 9, 2016

Disclaimer

There is no guarantee that the amount requested by qualified applicants will be matched in full by the City. If the number of qualified applicants and/or the dollar amounts they request collectively exceed the \$10,000 threshold, each qualified applicant may receive a partial match to ensure that none are excluded from participation.

Submission Instructions

For your convenience, completed applications can be emailed as an attachment to timothy.hansell@maricopa-az.gov or dropped off/mailed to the following address by the deadline:

City Hall 39700 W Civic Center Plaza Maricopa, AZ 85138 Attn: Grants Coordinator

Application or Program Questions may be directed to:

Timothy J. Hansell Grants Coordinator P: 520-316-6923 E: timothy.hansell@maricopa-az.gov

City of Maricopa Scholarship Match Funding Application FY 15/16

Part I: Organization Profile

- 1. Organization Name:
- 2. Executive Director Name:
- 3. Primary Address:
- 4. Organization Description
 - a. Mission
 - b. Purpose
- 5. Number of years serving Maricopa Residents
- 6. 501(c) non-profit? Y/N

Part II: Scholarship Program Summary

OVERVIEW

- 1. Scholarship Name:
- 2. Primary Contact:
- 3. Primary Contact Job Title:
- 4. Amount of Funds Requested:
- 5. The amount of scholarship money provided per awarded student
- 6. Estimated number of scholarships intending to award with requested funds

PROGRAM STATUS

- 1. Proof of availability of funding of scholarships by February 29, 2016
 - a. Fundraising Plan or
 - b. Financial Statement indicating use of existing funding sources
- 2. Sample of Student Application form and timeline
 - a. Include eligibility criteria

Part III: Narrative

- 1. Describe the contributions or services the organization has made to the Maricopa community.
- 2. If organization has provided any type of scholarship program in the past, please describe the nature of the program.

ORGANIZATION COMPLIANCE DOCUMENTS

- 501(c) Letter
 Most current Board of Directors roster
 Organization's Letter of Agreement due before issuing of match funds