Neighbor Up Action Grants
Fueling People Power

Special thanks to our funders and partners!
TELL US ABOUT YOU AND YOUR GROUP

Group/Organization Name:

Project Name:

Contact Person (from your group/organization):

Contact Home Address (include apt #):

Contact City, State, and Zip Code:

Contact Phone Number:

Contact E-mail Address:

Group/Organization Website (if applicable):

Exact (or nearest) address where project will occur:

Amount you are requesting ($500-$5,000):

Neighbor Up Action Grants are neighborhood specific (meaning they need to be focused in one neighborhood or part of a neighborhood). Please circle the neighborhood/city where your project will be implemented. (CIRCLE ONLY ONE)

Bellaire Puritas
Brooklyn Centre
Buckeye
Central
Clark Fulton
Cudell
Detroit Shoreway
Downtown/Campus District
East Cleveland (city of)
Fairfax
Gl enville
Hough
Kamm’s Corners
Lee Harvard
Little Italy
Midtown
Mt. Pleasant
North Collinwood
Ohio City
Old Brooklyn
St. Clair Superior
Shaker Square
Slavic Village
South Collinwood
Stockyards
Tremont
Union Miles
University Circle
West Park

Connect with us at @NeighborUpCLE on Facebook, Instagram and Twitter
KEY LEADERS

Who are the key leaders of this project and how are they connected to the neighborhood where the project will be done? These are the main people who will plan and carry out the project. **Volunteers who only occasionally work on the project or people who will only attend the event should not be listed.** The group must have no less than three unrelated leaders who are responsible for this project. If you have more than three, please use a separate sheet. List the leaders below, their contact information and how they are connected to and/or invested in the neighborhood (ie. lives in the neighborhood, attends church here, owns a business, etc.)

### KEY LEADER 1

Name: 

Home Address: 

City, State and Zip Code: 

Phone:     Email: 

Describe their connection to the Neighborhood:

### KEY LEADER 2

Name: 

Home Address: 

City, State and Zip Code: 

Phone:     Email: 

Describe their connection to the Neighborhood:

### KEY LEADER 3

Name: 

Home Address: 

City, State and Zip Code: 

Phone:     Email: 

Describe their connection to the Neighborhood:
Please circle the category that best describes your group/organization. (CIRCLE ONLY ONE)

Arts and culture group
Block group or residents’ council
Community-based organization
Faith-based group
Merchants’ or business association

Neighborhood Association
Safety group
School-affiliated
Youth organization
Other _________________

Does the applying group have a 501(c)3 designation?  ___ Yes  ___ No

Date the applying group/organization was established: ____________________________.

Who is in your group? Why did you come together? Share some of your past accomplishments.
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

DESCRIBE YOUR PROJECT: What issue does your project address? (Indicate the one that best describes your project.)

Arts & Culture  Climate Action & Sustainability  Communications
Education  Health Equity  Land Reuse
Race, Equity, Inclusion  Wealth Building
Other (please specific): ____________________________

OVERVIEW: Describe the project your group wants to do. Please describe goal(s) of the project.
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

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RESIDENT LEADERSHIP/OWNERSHIP:
Describe how the residents of the neighborhood are involved in this project.


COMMUNITY BUILDING:
Describe how this project creates new and stronger relationships that build trust and understanding, especially across lines of difference (race, age, homeowners/renters, etc.)


POWER BUILDING:
How does this project build power in your neighborhood? (meaning how does the project increase the strength and capacity of individuals, groups/organizations, and/or the community as a whole to make further change in your neighborhood?)


FUNDING:
What will funding from this Neighbor Up Action Grant be used for? Please be specific.

__________________________________________________________________________
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If you are applying for a project to address Climate Action & Sustainability, please answer the following two questions. If not, please move on to the next section (Identifying, Connecting, and Mobilizing Neighborhood Assets):

How does your project reduce local emissions or make neighborhoods more resilient to the impacts of climate change in Northeast Ohio?

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
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__________________________________________________________________________

How does your project’s goal(s) align with the “Triple Bottom Line” sustainability model of people, planet, and profit (or equity, environment, and economy)? See Page 11 for more information.

__________________________________________________________________________
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Great projects identify assets, connect with the assets, and then mobilize the assets on common interests of the neighborhood. These assets – or resources – are abundant, universally available (every community has them), and are essential to getting things done. Assets include residents, other community groups (associations, block clubs, merchants groups, gardening groups, network groups, etc. – where people aren’t paid to be there), institutions (established non-profits, public institutions, private institutions), local places (rooms, alleys, streets, buildings, land, community garden, tree canopies, front porches), local exchange (exchange of gifts, swapping, bartering, currencies, purchasing), and neighborhood culture (stories through music, dance, storytelling). **Name and describe how you will utilize these assets in your project. See page 9 in the instruction section for more info on this section.**

<table>
<thead>
<tr>
<th>Asset Type</th>
<th>Name(s)</th>
<th>How is this asset helping with your project?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residents</td>
<td></td>
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<tr>
<td>Community Groups</td>
<td></td>
<td></td>
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<tr>
<td>Institutions</td>
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<tr>
<td>Local Places</td>
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<tr>
<td>Local Exchange</td>
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<tr>
<td>Neighborhood Culture</td>
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</tbody>
</table>
Please list all of the major steps to make your project happen. What will you do first? What will you do second, third, etc.? Remember we do not fund completed projects. Timelines should match the project year.

<table>
<thead>
<tr>
<th>Activity/Task List</th>
<th>Start/End Dates</th>
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<tbody>
<tr>
<td>1</td>
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<td>2</td>
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<td>3</td>
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<td>9</td>
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<td>10</td>
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</tbody>
</table>
IMPACT

About how many people will be directly involved in making your project happen?

About how many people in your neighborhood do you expect this project to benefit?

IMAGINING THE FUTURE: Imagine one year from the end of this project. Your project has been a success! What changed in your community as a result of this project? What will be different in your neighborhood?

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If you are planning to pay anyone, purchase equipment, or rent space, please complete the following worksheet. If you cannot check the boxes that match the type of payment you are considering, do not include it in your budget.

1. Are you paying a professional?
   ____ We are hiring a professional, such as an artist, musician, landscape designer, caterer, trained teacher, etc. whose skills are necessary for us to complete our project successfully.
   ____ The services of this professional are not available in our neighborhood through volunteer assistance. (Please remember that your request for professional assistance must be less than 50% of your overall grant request.)

   If you checked both of these lines, you can include in your budget.

2. Are you paying a resident who is not a professional a stipend?
   ____ We have a leadership team of residents (3 or more people) who will decide who gets hired and paid.
   ____ Our leadership group will advertise the job to two or more residents who are not part of the group and not related to members of the group.
   ____ Those interested in the job will tell us in writing why they are qualified for the position.
   ____ The leadership group will review the applications and determine who will get the stipends.
   ____ The leadership group will get an invoice or bill from the person getting paid, will review the invoice, and will make sure the work is properly done before paying the person.

   If you checked all of these lines, you can include in your budget.

3. Are you purchasing equipment that will last awhile?
   If you are planning to buy anything with your grant dollars that will still be useful after the project is over, such as tools, electronic devices, sports or outdoor equipment, etc., please complete the following checklist:
   ____ This equipment is necessary for us to do our project.
   ____ This equipment cannot be found through a loan or donation.
   ____ At the end of our project, equipment will be available for use by people in the neighborhood who need it for other community projects.

   If you checked all of these lines, you can include in your budget.

“...trusting the people is the indispensable precondition for revolutionary change.”
Paulo Freire
Please enter your estimated project budget in the table below. Try to organize your expenses by the categories under the “EXPENSE ITEM” column. In the column called “NUP GRANT”, enter the dollar amount that you are requesting for each item from Neighbor Up. In “EXPLANATION OF EXPENSE ITEM”, explain what item is used for in project. In the column called “MATCH”, enter the estimated dollar amount you will get through another source, like a donation or volunteer labor. For example, if you have 10 volunteers working 5 hours each on this project, your total volunteer labor would equal 10 X 5 X $12 = $600. You would enter in the “MATCH” column next to “Help”.

In the column called “TOTAL”, please enter the total cost for each item. Then total all columns and enter the amounts at the bottom of the table. The figure in the “TOTAL” box for the column titled “NUP GRANT” should be the amount you are requesting for this grant.

### THE BUDGET

<table>
<thead>
<tr>
<th>EXPENSE ITEM</th>
<th>NUP GRANT ($ Amount)</th>
<th>EXPLANATION OF EXPENSE</th>
<th>MATCH ($ Amount)</th>
<th>EXPLANATION OF MATCH</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. FOOD</td>
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<td>2. SUPPLIES</td>
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<td>(items that will be consumed)</td>
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<td>3. PRINTING</td>
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<td>(flyers, invitations, postcards)</td>
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<td>4. EQUIPMENT*</td>
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<td>(equipment lasts longer than project)</td>
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<td>5. FEES/PERMITS</td>
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<td>(city, county, etc.)</td>
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<td>6. SPACE</td>
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<td>(cost of space)</td>
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<td>7. HELP*</td>
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<tr>
<td>(professional help, paying resident, volunteers)</td>
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<td>Volunteers</td>
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<td>8. OTHER</td>
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<tr>
<td>TOTAL</td>
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</tbody>
</table>
Organization Name

Contact Person

Address

City, State, and Zip

Phone Number

Email Address

HOW DID YOU HEAR ABOUT NEIGHBOR UP ACTION GRANTS?

- Word of mouth
- Neighborhood meeting/event
- Neighborhood group or organization (name: ________________________)
- Email
- Postcard
- Website (name: ________________________________)
- Blog (name: ________________________________)
- Newspaper/Magazine (name: ________________________________)
- Radio/TV
- Other (explain: ________________________________)

PROPOSAL CHECKLIST

- Grant application proposal is completely filled out
- The original and 4 copies of your proposal (preferably two-sided copies and stapled)
- All necessary letters of support from cooperating organizations are included with each copy of your proposal
- Before Preparing Your Budget page is completed (if necessary)
- Budget page is completely filled out
- 501(C)3 determination letter is included if group does have 501(C)3 status.
- If using a fiscal sponsor a copy of the fiscal sponsor’s determination letter is included along with a letter on the fiscal sponsor’s letterhead agreeing to assume that role
- Price quotations for contract services, equipment, and supplies are attached to each proposal

PLEASE RETURN GRANT PROPOSAL TO:

Neighborhood Connections
5000 Euclid Avenue, Suite 310
Cleveland, OH 44103
216.361.0042

Connect with us at @NeighborUpCLE on Facebook, Instagram and Twitter