Elmo M. Royce Haight Booth Youth Fund
Guidelines for Grantseekers

WHAT IS THE ELMO M. ROYCE FUND?
In May of 2003 HSBC Bank transferred the management of the Elmo M. Royce Youth Fund to the Community Foundation of Elmira-Corning and the Finger Lakes, Inc. The Community Foundation builds community and inspires philanthropy. We support creative, effective and innovative programs in the areas of human services, arts and culture, education and youth, health, the environment and civic affairs. **The Elmo M. Royce Fund is a component fund at the Community Foundation that encourages funding requests from non-profit organizations whose programs support youth activities and recreational programs for the youth of Schuyler County, New York.**

WHO IS ELIGIBLE TO RECEIVE A GRANT?
The Community Foundation supports a wide variety of projects but does restrict itself to organizations:
- located in and providing services to the residents of Schuyler County
- classified as nonprofit charitable organization under section 501(c)(3) of the IRS code; or publicly supported organizations such as school districts and municipalities

WHAT TYPES OF PROJECTS ARE NO SUPPORTED?
Organizations may not submit more than **one** application for funding at a time. The Elmo M. Royce Fund generally does not make grants for the following:
- Religious purposes
- Political or partisan purposes
- Activities taking place before grant decisions are made
- Deficit funding or debt retirement
- Individuals

WHEN SHOULD MY ORGANIZATION APPLY?
The Elmo M. Royce Advisory Committee accepts applications twice a year. Awards will be made within 6 weeks from the deadline.

WHAT IS THE GRANT AWARD RANGE?
Grant awards range from $100 to $2000.

APPLICATION DEADLINE
October 5 & April 3

WHERE SHOULD I SEND MY APPLICATION?
Applications must be postmarked by the deadline date.
Please submit applications to: Community Foundation of Elmira-Corning and the Finger Lakes
Elmo Royce Youth Fund
301 South Main Street
Horseheads, NY 14845

Feel free to contact Sara Palmer at 739-3900 or sep@communityfund.org if you have any questions. Also visit our website at communityfund.org.
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GRANT APPLICATION

Date: _____________________

Organization: ________________________________________________________________

Name/Title of Administrator: _____________________________________________________

Mailing Address: __________________________________________________________________

City/State/Zip: ___________________________________________________________________

Phone: _______________________________

Email: ________________________________

CONTACT PERSON

Name/Title: ____________________________________________________________________

Email: __________________________________ Phone: _______________________________

Program Name: _________________________________________________________________

Amount Requested: ___________________________ Number of Youth Served___________________

Program Description (150 words or less please include expenses and fundraising goals)

_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________

Signature:        Date: