



Supporting Communities in Oktibbeha County

Grant Proposal Guidelines

Starkville Oktibbeha Achieving Results (SOAR) is a non-profit, charitable organization, operating as an affiliate of CREATE Foundation (Tupelo, Mississippi). Its purpose is to improve the quality of life for people in Oktibbeha County. SOAR serves as a link between donors and the community and seeks to promote and provide leadership and cooperative action in support of programs in the areas of:

- **Civic & Cultural** (i.e., beautification, public good, performing arts, etc.)
- **Education & Human Development** (i.e., Tuition Guarantee, G.E.D., early childhood, etc.)
- **Health & Human Services** (i.e., family enrichment, emergency response, etc.)

SOAR will consider support only for programs that serve Oktibbeha County communities. The following policies govern the award of grant support from SOAR.

- SOAR considers grant applications only from (1) non-profit, **tax-exempt organizations** providing services to the Oktibbeha County area or (2) **projects for the public good**.
- SOAR prefers requests for funding of **startup** projects/programs (seed money), **capital** needs (“bricks & mortar”) and/or projects that show **expansion of successful** programs/services.
- SOAR is most interested in funding programs/projects that have the **greatest impact** and that provide **lasting, sustainable results**.
- SOAR typically does not provide funding for salaries or continuing operational support to sustain programs or projects.

Application Process

The local Board of Directors manages the grant-making process by receiving and evaluating grant applications and making recommendations to the CREATE board for final approval. After board consideration of all grants, you will be notified of the grant proposal decision. If you are unsure about your proposal idea or if you have questions concerning any portion of this grant application, please feel free to contact Jan Eastman, Executive Director, at jeastma1@bellsouth.net.



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Grant Proposal due October 31

Submit to 108 Alabama Street, New Albany, MS 38652 or jeastma1@bellsouth.net

Telephone: Jan Eastman at 504/585-5928

Submitted by: _____
(Organization)

Executive Director: _____
(Typed Name) (Signature)

Contact Person: _____
(Typed Name) (Phone) (Email)

Address: _____ Zip: _____

Check one: New Organization _____ New Program _____ Existing Program _____

Funding Category (check all that apply):
 Civic Cultural Education
 Health Human Services Human Development Other

Check one: have your 501(c)3 (**Attach IRS letter.**)
- or - have a fiscal sponsor that is a 501(c)3 _____
(Name & EIN)

Target Population(s) _____

Program Site Address _____

Amount Requested \$ _____ Total Project Budget \$ _____
Please attach a budget (and narrative, if necessary for clarification).

Summary of Proposed Program or Event: (Attach additional pages as needed)

Please attach a list of your board of directors.

Approved Disapproved Amount \$ _____ Date: _____