**City of Dunn**

**Policy and Procedures for Nonprofits Organization (NPO) Request and Administration**

**PURPOSE:**

To establish a policy and procedure that ensures an accountable and consistent process for submitting, reviewing, and approving nonprofit agency funding requests. This policy is subject to the availability and allocation of funds by the City Council.

**POLICY:**

The city of Dunn Government has no statutory requirements to fund NPO’s. However, the City Council may consider providing funding to NPO’s that provide a vital service the City does not provide, or if the NPO agency can deliver the service at a reduced cost or in a more expedient manner or to better the community. Approved requests will be funded for one year only. All NPO’s must apply annually for consideration.

**PRIORITIES:**

Priority areas for funding include two categories – Animal Welfare, and Arts, Culture and Recreation.

**ELIGIBILITY:**

* Startup NPO’s will be considered for funding, but must submit a budget and a plan of operation.
* Only one application will be allowed per NPO per fiscal year.
* NPO must provide Articles of Incorporation, by-laws or other organization documents.
* NPO must provide a mission statement along with goals and objectives, as well as an organizational chart.

**PROCEDURES:**

1. **Application Process**
* A public notice announcing the request for application will be made on the City of Dunn’s website ([www.dunn-nc.org](http://www.dunn-nc.org)) and in the local newspapers by the first week in January of each year to coincide with the annual budget process for the upcoming fiscal year.
* The application form will be available digitally on the City of Dunn’s website, and physically in the City Manager’s Office.
* Applications are due back to the City Manager’s Office by the last working day in February. The address is 401 E. Broad Street (physical) PO Box 1065 Dunn, NC 28335.
* Applications received after the deadline will not be considered for inclusion in the annual budget for funding as part of the budget process.
* Applications that are incomplete will be deemed ineligible for funding and will be returned to the agency with an explanation of rejection.
* Annual budget, board roster and a non-discrimination statement must be submitted with application.
* Annual audit or financial review, in a form and substance acceptable o the City of Dunn for prior year must be submitted with application.
* All other funding sources for prior year must be included with application.
* Submission of a complete application is no assurance of funding.
1. **Application Criteria**
* NPO must submit complete application by published deadline of the last working day in February.
* Application must state community need for organization’s services and NPO must provide a service that meets the description in the policy statement above.
* Application must state outcome based goals and outline a plan to meet stated goals.
* NPO must demonstrate diversity of funding sources.
* NPO must demonstrate financial stability.
1. **Review Process**
* Eligible applications will be reviewed by the City Council.
* The City Manager will provide the application to City Council for review as part of the annual budget process.
* The NPO’s that are selected for funding consideration must make presentations to the City Council at a work session.
* The City Council will be responsible for determining the funding amount for each NPO chosen to receive funding.
* Letters will be sent to the NPO applicants notifying them of the outcome of their requests no later than June 30th.
* NPO’s that are awarded funding will be sent a memorandum of understanding which must be completed and returned in a timely manner.
1. **Accountability**
* A financial report in form and substance satisfactory to the City of Dunn must be submitted by the NPO’s at the end of the funding period, June 30th.
* An annual program performance report which will include the use of the City’s funds and the accomplishments of the program must be submitted by the NPO at the end of the funding period, June 30th.
* Failure to comply with any of the above requirements will result in suspension of current funding and/or elimination of future funding.

**City of Dunn Nonprofit Funding Application**

**July 1, \_\_\_\_\_\_ through June 30, \_\_\_\_\_\_**

AGENCY NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

WEBSITE ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EXECUTIVE DIRECTOR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TELEPHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-MAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TELEPHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-MAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FAX: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FEDERAL ID NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| Funding Source Summary(Briefly state how any awarded funds would be used) | Current Funding(FY \_\_\_\_\_\_) | Requested Funding(FY \_\_\_\_\_\_) |
|  $ $ |
|  |

***Agency and Program Overview***

1. Please provide a brief history of the agency – include mission, date of incorporation and years of operation.
2. Date of Incorporation:
3. Years in Operation:
4. Mission or Vision Statement (if applicable):
5. Brief History of the Agency:
6. Describe the identified community need(s) and what the program(s) funded will address.
7. Describe any operational and/or financial changes being considered in the program(s) to be funded for FY \_\_\_\_\_\_\_\_\_\_\_.
8. Outline anticipated internal or external revenue sources for the program. Indicate whether these are ongoing or new sources.
9. Give specific examples of your agency’s coordinated/collaborative efforts with each other outside agencies, which accomplish or enhance the projected results in the program(s) to be funded. (If possible, please bullet the list)
10. List all annual or other fundraising activities you have initiated and the amount of profit for each, preferably for the last three years.
11. Place and “X” in the box that best describes the category of program(s) to be funded (multiple selections are permitted).

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Category | Youth | Adult | Senior Adults | Persons with Disabilities | At Risk | Veterans |
| Animal Welfare |  |  |  |  |  |  |
| Arts, Culture, & Recreation |  |  |  |  |  |  |

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Executive Director Board Chair

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Date