



**Town of Yucca Valley
Partnership Funding Program Guidelines and Instructions
Fiscal Year 2018-2019**

Partnership Funding Program Background

The goal of the Partnership Funding Program is to provide supplemental funding opportunities for various non-profit community groups who enhance the Quality of Life in Yucca Valley through programs or services. Applications requesting Measure Y funding must meet the Revenue Measure Oversight Commission's general policy guidelines. All applications will be scored and those with the highest score will be recommended for consideration of funding by the Town Council.

Funding Available and Minimum Eligibility Requirements

The available funding for varies annually, and must be applied for by a public entity, service organization or other private non-profit organizations. Measure Y applications must support a minimum partnership request of \$5,000. All partnership funding will be awarded by the Town Council at a public meeting. Each applicant will be notified of the meeting date and time.

Eligible Public Service Programs

The California constitution prohibits the Town from appropriating and expending public funds for private purposes. Funding is allowable, however, for program support that serves a public purpose. Therefore, any application submitted must include a specific description of how the proposed program or service will serve a public purpose. Funding will not be available for capital projects through this program.

While not limited to such, prioritization will be generally aligned with the impact of the program(s) offered, number of potential participants, demonstrated history with and within the Town, availability of alternative or competing programs, assistance in meeting an identified need, degree of financial dependence on the requested funding, financial and organizational stability of the program applicant, and other criteria as may be appropriate.

Applications for Partnership Funding

At this time, the Town is accepting applications for the 2018-2019 program year. Applications for Public Services Programs are available at:

Town of Yucca Valley
57090 29 Palms Highway
Yucca Valley, CA 92284
(760) 369-7207

These application forms and instructions can also be accessed on the Town's website at <http://www.yucca-valley.org> For any questions, contact **Sharon Cisneros, Finance Manager** by email at scisneros@yucca-valley.org or by calling the number above.

The deadline for submitting applications is Thursday, May 3 2018, no later than 5:00 p.m. (Application forms must be received by the Town no later than 5:00 p.m. PST at the office listed above, or must be postmarked by this date).



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Instructions

Please answer each item of the two page application. If an item is not applicable, please write in an "n/a" so that application is complete. Any incomplete applications will be returned.

Please include all required attachments to your application. If a recent audit or financial report is not available, a federal tax return for your fiscal year ending within the last 2 years is acceptable, however, a financial statement or audit is preferred.

Additional sheets may be attached to the application if needed. If you prefer to attach your responses for Page 2, please write "see attached" in the box and add your attachments.

If you have any questions, or need further clarification on specific line items, please contact

Sharon Cisneros, Finance Manager
scisneros@yucca-valley.org
760-369-7207 ext 229

All applications and supporting documents should be returned to the following address:

Town of Yucca Valley
Attn: Sharon Cisneros
57090 29 Palms Highway
Yucca Valley, CA 92284

We appreciate your desire to provide services to the residents of the Town of Yucca Valley. We look forward to working with you to make Yucca Valley a great place to live.



**Town of Yucca Valley
2018-19 Partnership Funding Application**

Agency/Organization		

Mailing Address		
_____	_____	_____
City	State	Zip
_____	<input type="checkbox"/>	<input type="checkbox"/>
Agency Phone Number	Non-Profit	Other

_____	_____
Contact Person	Title
_____	_____
Contact Phone Number	Contact Phone # (Cell or Other)

Contact Email Address	

Anticipated Agency Budget

Amount Requested from Town of Yucca Valley

Please check all that apply

FY 2018-19
\$ _____
\$ _____

Funding requested from _____ **Measure Y** _____ **General Fund** _____

Describe the project or program for which funds are requested (25 words or less):

Benefit of project/program to the residents of the Town of Yucca Valley:

Specific items to be funded: (Provide Details on Attached Form A)

1	_____	\$	_____
2	_____	\$	_____
3	_____	\$	_____

Required Attachments:

- Copy of 501(c)3 incorporation papers
- Current list of agency board of directors (w/ contact info.)
- Project and Program Details (Attachment A)
- Copy of recent Audit or Financial Report

_____	_____
Signature	Date

_____	_____
Print Name	Title



**Town of Yucca Valley
Partnership Funding Program
Attachment A: Project and Program Details**

2018-19 Request

Please provide details about how 2018-19 Town of Yucca Valley partnership funding request would be used if approved. Attach additional sheet if necessary.

Other Services Requested from the Town of Yucca Valley

List any other anticipated requests such as meeting rooms, event support, etc. (Additional application and review of other service request may be required.)

- 1 _____
- 2 _____
- 3 _____
- 4 _____