



COMMUNITY ENHANCEMENT PROGRAM GRANT Mandatory Pre-Application Procedures.

Applicant Organization:	
Project/Program:	
for verify whether city permits are rechanges or improvements to a prope	nhancement grant, applicants are responsible quired for a project. If the project results in any erty or building, contact the City Planning office rmit is required. Applications requiring a permit proposed budget detail.
improve or utilize city run or city own Manager's office at 503-625-5524 .	Enhancement Grant, applicants wishing to ned facilities must verify eligibility with the City Applications involving city run or city owned on approval from the City Manager will be
application, the undersigned certifies that	ood Community Enhancement Program Grant the project and the sponsoring organization he above requirements do not apply to the
Signature of Party Authorized to Represent the Organization	Printed name
Date	



Date



Sherwood Community Enhancement Project Application

Application				
Before completing this form, please read the Community Enhancement Program Instructions for complete submittal instructions to ensure that your proposal meets the requirements for funding. Applications received after the deadline will not be accepted. Liability insurance coverage may be required.				
Title of Project/Program:				
Applicant/Project Sponsor:				
Organization Type: F	ederal Tax ID Number:			
Contact:	Daytime Phone:			
Email:				
Address:				
be as much as the amount reque	or no funding. The amount received may est in this grant application, but no more. ed solely for the program or project as iduals who have partnered with an			
The undersigned certifies that the following inf complete and has been provided for the purpo the City of Sherwood through the Metro Commproposal described.	se of obtaining financial assistance from			
Signature of Party Authorized to Represent the Organization	Printed name			





Project Budget Summary

Grant Funds Requested	
+ Matching Funds (Cash)	
+ In-Kind Matching Funds:	
= Total Cost of Project:	

Proposed start date: Proposed end date:

PROJECT DETAIL

1. Project Description-Describe the proposed program or project including the intended use of the CEP funds, project goals and overall objective and location of the project.

- 2. Identify by letter and describe how this project meets one or more of the goals for funding:
 - a) Improves the appearance or environmental quality of the City
 - b) Increases recycling opportunities or reduces solid waste production
 - Rehabilitates or upgrade the attractiveness or market value of public areas
 - d) Results in the preservation or enhancement of wildlife, riparian zones, wetlands, forestlands or marine areas, and/or improve the public awareness about them.
- e) Results in improvement to, or an increase in recreational areas and programs in the City
- f) Results in increases in safety within the city
- g) Provides skills training, work or education opportunities for youth, seniors, low income or underserved populations persons
- h) Enhances art and culture
- i) Improves the employment or economic opportunities residents

3.	List anticipated project milestones and dates.
4.	Will this grant request be used for one phase of a multiphase project, with possible grant requests for future phases? Yes No If yes, please explain the plans, the expected funding sources and the estimated project cost by funding source.
5.	If this project will require continued funding beyond the grant period, explain what measures have been taken to ensure the funding will be available.
6.	Who will benefit if this project is funded? How will they benefit?

7.	Describe prior experience managing similar projects, including prior Community Enhancement Projects.
8.	What community resources will be used as support for this project? (e.g. community or city-owned property, city departments, transportation services or other civic groups)?
9.	Does this project require coordination with other public or private organizations? Yes No
	If yes, please describe what type of coordination is needed and whether the coordination has been completed.
10	If the project is located on private land, discuss the public benefit of the project. (Attach landowner permission for the project with this application).

PRIOR APPLICANTS

- 11. Is this your organization's first grant application for a Community Enhancement Program? If no, please answer item 12 If yes, please proceed to item 16

 Yes No
- 12. Has your organization received a Community Enhancement grant in the last 3 years? (Include other municipality Community Enhancement grants) If yes, please answer items 13 and 16. If no, please proceed to item 14.

Yes No

13. Please describe the project/programs for which your organization received funding-What was the project intended to do? Was it successful? What was the overall community impact of the project? Were all required steps, including submission of budgetary and exit report information completed?

14. Was a Community Enhancement grant received last year?

Yes No

If yes, what is the status of the project? Have there been any unexpected issues or costs? Does the project remain on schedule? Have required reports been submitted?

15. If this application is to support an ongoing or previous project, please provide details regarding the continued need. Has there been unexpected delays or costs associated with the project? If for routine support, have other options been investigated? What is the potential impact if funding cannot be achieved through this grant?

PROPOSED BUDGET DETAIL

- 16. Budget Narrative: How will grant funding be used? Why is grant funding critical to the success of the project? How will additional community resources or partnerships be used to support this project?
- 17. List all grants applied for in support of this project and commitments confirmed to date.
- 18. Match funds and Project Budget: List all sources to be used for match funds (e.g. volunteer hours, cash, and in-kind donations). For the 2025-2026 grant cycle, please use \$33.49/hour to calculate the value of volunteer labor.

Project budget: List all project expenses and demonstrate which expenses will be covered with matching funds, and which expenses will require grant funds.

Expense	Grant Funds Requested	Matching Funds	In-Kind Matching	Total
		(Cash)	Support	
Example: 50 hours of	\$0	\$0	\$1,674.50	\$1,674.50
labor at \$33.49/hr setup & tear down				
Example: Supplies (paint, glue & brushes)	\$200	\$0	\$0	\$200
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Total				

20. What percentage of Community Enha services or administrative costs?	ncement funds will be used for personnel
21. If only partial funding is available, coul in phases?	ld your project be reduced in size or done

If yes, what is the minimum grant amount that would allow the project to be performed: \$

Describe how that would change the scope of work.

19. Percent of Total Budget provided by applicant: