

Commission's Grant Application Form

Shelby County Board of Commissioners

GRANT APPLICATION

Legal Name of the Organization: Deliverance Temple Ministries, Inc.

EIN: 62-1805225

Street Address of Organization 5078 Milbranch Road

Office Phone: 901-461-5134

E-mail geraldhunt1026@yahoo.com

(Section Break)

EXECUTIVE DIRECTOR

First Name Gerald

Last Name Hunt

(Section Break)

GENERAL CONTACT FOR THIS REQUEST(if other than Executive Director)

First Name Nathaniel

Last Name Jackson

Title: Church Administrator

(Section Break)

DESCRIPTION OF GRANT REQUEST

Program/Project Area: Community Youth Outreach

Amount Requested \$5,000

Total Organizational budget (for current year): \$15,000

Total Project/Program Budget: \$5,000

Dates covered by this budget: September 22-24, 2016

Project/Program Name: Deliverance Temple Youth Enrichment Program

(Section Break)

INTRODUCTION AND BACKGROUND OF ORGANIZATION

Please summarize in a short paragraph the purpose of your agency. Briefly explain why your agency is requesting this grant, what outcomes you hope to achieve, and how you will spend the funds if a grant is made.

Develop partnership between community-based organizations to increase awareness regarding: Continuing Education Gang Violence Provide Tutoring to our Adopt-a-School Partner Oakshire Elementary School. Purchase of School Supplies

(Section Break)

Narrative - Organization

Current programs and accomplishments. Please emphasize the achievements of the recent past.

Summer Camps College Youth Scholarships Memphis Delta Chapter Youth Scholarships Annual Community Day Youth Enrichment Field Trips Tutoring Classes

Numbers of paid full-time staff: 0

Number of paid part-time staff: 0

Number of volunteers: 10

(Section Break)

Narrative - Funding Request

Please describe the program/project for

Community Day- To give: Referral Service and Information on Government Assistance Programs College Preparation Reduce

which you seek funding and include how it will benefit the general welfare of residents in Shelby County, TN.

Gang Violence Teen Pregnancy Prevention Fatherhood Responsibility & Commitment for maintaining Strong Families

General Operating Support

If applying for general operating support, briefly describe how this grant will be used.

This grant will provide school supplies, literature, Hand-outs and flyers with referral information, Delta Chapter Scholarship, School supplies for Oakshire Elementary (Adopt-a-School), Rental of tent, chairs, Porta-Potty, Amusement Rides for youth.

Project Support

Please explain the specific project including a statement of its primary purpose and the need or problem that you are seeking to address.

Community Day will address: The reduction of Gang Violence Enhance Fatherhood, Marriage, Teen and Families through Education and Nurturing Programs Maintain Healthy Families, Teen Pregnancy Awareness Knowledge of available government programs.

How does the project contribute to your organization's overall mission?

The goal of This Community Day will uplift our neighborhood through increased knowledge of services to maintain Healthy Families and the awareness of sustaining a Clean and Safe Community Environment.

(Section Break)

Narrative - Evaluation

Please explain how you will measure the effectiveness of your activities. Describe your criteria for a successful program and the results you expect to have achieved by the end of the funding period.

Community participants will be asked to complete a survey and contact information. A follow-up will be conducted to confirm the use of referrals and programs. Volunteers notate comments to address future needs or problems preventing achievement of our goals.

Attachments:

If your request is under \$25,000 please attach the following:

1. Copy of the entity's 501 (c) 3 certificate for charitable organizations or 501 (c) 4

certificate for civic organizations

2. Most recent IRS Form 990 or Financial Statements (balance sheet and income statement) as of the most recent fiscal year end certified by Chief Financial Officer/Treasurer of the entity.

3. Complete Budget for grant request

If your request is \$25,000 or more please attach the following:

1. Copy of the entity's 501 (c) 3 certificate for charitable organizations or 501 (c) 4 certificate for civic organizations

2. Copy of an annual audit as of a date within 18 months of the start of the current fiscal year.

3. Complete Budget for grant request

File 1 [doc20160822180645.pdf](#)

File 2 [doc20160822180349.pdf](#)

File 3 [doc20160822181911.pdf](#)

ACKNOWLEDGEMENT:

Read, and if you agree to the provisions, sign the following:

The information provided has been submitted in good faith and as completely as our records and recollections permit.

I understand that the information provided in this application shall be open to inspection upon filing with the office of the Shelby County Board of Commissioners.

Signature: Gerald L. Hunt

Printed Name: Gerald L. Hunt

Date 8/22/2016

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