



Helping Hands Grant Application

Helping Hands Grant Application

Thank you for your interest in the Helping Hands Program! Please see the Helping Hands Program Information sheet for program details. In order to be considered as a grant recipient you must complete this application. Due to limited funds and resources, not all submissions will be awarded. Keep Lake Dallas Beautiful will select grant recipients using the following criteria:

- The completeness, accuracy and credibility of the application
- The seriousness of the current specific need
- Whether the grant will make a significant difference to the person, area or community in need
- The representation that an experienced and competent individual/group will carry out efficient and economical management.

Keep Lake Dallas Beautiful is particularly interested in funding projects that assist individuals, families and/or communities who:

- Have a beautification/improvement project
- Are financially unable to address the need
- Have been diagnosed with chronic disease or disability
- Are physically unable to perform the tasks necessary to address the need
- Do not have the proper resources/tools to address the need
- Are residents of Lake Dallas

Today's Date: _____

Name of Helping Hands Team*: _____

*The Helping Hands Team is the group who will be performing the work necessary to meet the requested need.

Contact Person: _____

Address: _____

City: _____ State: _____ Zip: _____

Mailing Address (if different): _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ E-mail: _____

Project Type (Who/What are you requesting funds to help?):

- Individual Family Community Area (park, building, playground, etc.)

Description of the Need: _____





Helping Hands Grant Application

Page 2

Helping Hands Program

Why was this project selected? _____

List the activities necessary to complete your project & a projected time line:

Who is the target group & how many people will your project affect? _____

List the supplies needed for this project and their approximate cost: _____

List any other grants/donations you have received for this project: _____

Certification

The information contained in this request has been reviewed and is an accurate description of the project proposed for funding. We have read and understand the information and criteria for funding. If selected as a Helping Hands Grant recipient, we agree to abide by the criteria.

Application Preparer Signature

Please submit application to:

Holly Deitrick, Special Events Coordinator
City of Lake Dallas
212 Main Street, Lake Dallas, TX 75065
hdeitrick@lakedallas.com
FAX: 940-497-4485

