



CITY OF RIVERSIDE **HUMAN RELATIONS COMMISSION**

COMMUNITY SUPPORT GRANT APPLICATION

Please submit completed Grant Application Form with all corresponding documents to HRC@RiversideCA.gov prior to the deadline as indicated on the checklist. For questions or assistance call Krystelle Schneider at (951) 826-5681. Please type or print the following information.

Organization Name: _____

Organization Mailing Address: _____

Contact Person: _____

Email: _____

Phone Number: _____

Project Title and Description

Project Title: _____

Project Address: _____

Project Description:

How does the project align with the mission of the Human Relations Commission, and how will it aid in the elimination of prejudice, intolerance, and discrimination?

How will the project empower Riverside communities and promote an informed and inclusive multicultural society?

How will the community be involved in the project and how will it benefit the community?

Can you describe your organization's prior experience in carrying out similar projects?

What is your plan for evaluating the success of the project and what specific outcomes will you use to measure success?

Project Timeline

Project Start Date: _____

Completion Date: _____

Please provide a detailed timeline of the anticipated milestones for your project.

Start Date	Milestone Ex: find location, recruit volunteers	Completion Date

Estimated Expense Form

Itemized Expenses Please provide description	Estimated Cost	In-Kind Donations (Services or Materials)

Donation Examples, services fees, material, gift cards, food,
entertainment, etc.

Signature: The signatory declares that the assigned applicant assures that any funds received as a result of the application will be used only for the purpose set forth herein.

Name: _____

Organization: _____

Phone Number: _____

Signature: _____ Date: _____

Authorization Process:

Date Received:	Reviewed by:	Date Reviewed:
HRC Review Date:	Reviewed by:	
HRC Approval:		Date Approved: