# CITY OF RIVERSIDE

#### City of Riverside

## **Human Relations Commission**

#### **COMMUNITY SUPPORT GRANT APPLICATION**

Please submit original Grant Application Form with all corresponding documents and attach event flyer to Community & Economic Development Department, Neighborhood Engagement Division prior to the deadline as indicated on the checklist. Any questions please call for assistance at (951) 826-5430. 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:	

### **Project Timeline**

Project Start Date:

Completion Date:		<u></u>
Please provide a detailed	timeline of the anticipated	milestones for your project.
	,	
Start Date	<b>Milestone</b> 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.

	_	d applicant assures that any e used only for the purpose set
NAME:		
Phone Number:		
SIGNATURE:	Date:	
Authorization Process:		
Date Received:	Reviewed by:	Date Reviewed:
HRC Review Date:	Reviewed by:	
HRC Approval:		Date Approved: