Following a disaster impacting Lafourche Parish, Terrebonne Parish, and Grand Isle, Bayou Community Foundation (BCF) may award grants to nonprofits providing Short Term Disaster (“Emergency”) Assistance and Mid- to Long-Term Recovery and Rebuilding Programs directly serving residents of Lafourche/Terrebonne/Grand Isle, dependent on funds available in BCF’s Bayou Recovery Fund.

**BAYOU RECOVERY FUND FOR HURRICANE IDA RELIEF GRANTS**

**Grant applications will be accepted and grants awarded as described online on the Hurricane Ida Relief Grants tab at** [**www.BayouCF.org**](http://www.BayouCF.org)**.**

**Submit this completed application along with other required documentation listed below by email to:** **armandj@bayoucf.org**

1. **Nonprofit’s 501c3 approval letter from the IRS**
2. **Completed ACH authorization form (can be found at** [**https://www.bayoucf.org/hurricane-ida-relief-grants/**](https://www.bayoucf.org/hurricane-ida-relief-grants/)**). *If applicant has already submitted ACH form for previous Hurricane Ida grant payment, it is not necessary to re-submit.***
3. **2021 End of Year Financial Statement / Completed Budget as of December 31, 2021**
* Documents saved in PDF format are preferred; Word documents are permitted.
* Please no jpgs, pngs or photo files.
* Please do not send links to files via Google Drive or other cloud storage services; only send required documents as attachments via email.

**Questions?**

**Call, text or email Jennifer Armand at 985-790-1150 / armandj@bayoucf.org**

**PART 1: APPLICANT INFORMATION**

**Nonprofit Organization Name** (as recognized by the IRS for 501c3**):**

**Tax ID** (for entity recognized by IRS as 501c3):

**Date 501c3 Approved by IRS:**

**Contact Name and Title:**

**Email Address:**

**Cell phone number:**

**Mailing Address (including city, state, ZIP)**

**PART 2: GRANT REQUEST SUMMARY**

**Date of Request:**

**Dollar Amount of Grant Requested:**

**General Description of Organization’s Work and Communities Served:**

**Program/Project to be supported by grant:**

**PART 3: PROJECT DESCRIPTION**

**What impact(s) of the recent disaster do you aim to address with this grant?**

**Please describe the program/project for which grant will be used, how it will be implemented, the geographic service area, and anticipated number of residents or households served.** *(use as much space as necessary)*

**If applicable, identify any partnerships with other nonprofits or how your project is coordinated with other local response efforts.**

**Is this program/project currently in operation?**

**If not, anticipated start date?**

**Anticipated end date?**

**PART 4: GRANT BUDGET**

**Organization’s Cash on Hand (including all liquid assets) as of 12/31/21:**

**Please itemize or explain costs for the program/project that you are requesting a grant to help fund.**