

FY21-22 Community Funding Application

Organization:		
Contact:		Title:
Address:		
City:	State:	Zip:
Phone:	Ext.:	Email:
Are you a faith-based organization? ☐ Yes ☐ No		
Are you able to track how many of the individuals you serve live in Goodyear? ☐ Yes ☐ No		
How many Goodyear residents did you serve in FY19-20?		
Priority population: ☐ youth, ☐ families in crisis, ☐ special populations, ☐ other		
Which Goodyear community Funding priority(ies) does this application address?		
☐ Expanding services available in the Goodyear Community that are designed to meet the needs of minority populations, people in (or at risk of being in) crisis, or the homeless		
☐ Fostering social and cultural cohesion in Goodyear		
☐ Innovative solutions to bring more mental health care services into Goodyear, particularly for youth		
☐ Innovative transportation solutions for Goodyear residents, particularly those that help residents meet their health care needs		
☐ Regional solutions that result in increased access and a greater variety of services available to Goodyear residents and the workforce		
Explain specifically how this funding request addresses the priority(ies) selected above.		
Is this application for: ☐ a specific program/project ☐ general operating support		
How specifically used (if program/project)		
How will you track the number of Goodyear residents served?		
How many Goodyear residents do you expect to serve in FY21-22?		
In addition to number of Goodyear residents served, please list any other measurable outcomes of this application. Please specify your results quantitatively.		

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What is the dollar amount of your FY21-22 funding request?
If the city is unable to fund your program at the full request, what is the minimum amount of funding you will accept to provide program services described in your application?
What other sources of funds have you requested to assist in meeting your need? Include any other funding you receive from the city of Goodyear.
Explain how your program will be supported at the end of this funding cycle.