Cuba Township

Social Services Funding Allocation Guidelines 2027

Cuba Township provides grant funding to social service organizations that provide services the Township might otherwise provide directly or indirectly to its residents. The authority for these grants is 60 ILCS 1/235-5(6), which allows the Township to tax for the purposes of providing services in cooperation with non-for-profit corporation, or nonprofit community services association.

The timeline for the process is as follows:

November 12, 2026: Applications will be available to 501(c)3 organizations serving Cuba Township

January 13, 2027 Application return date. No applications received after 4:00 PM will be considered. Two hard copies must be submitted to:

Cuba Township
Attn: Heidi Shannon
28000 W. Cuba Road
Barrington, IL 60010

January 14, 2027: Copies of applications received will be provided to the Board for review.

March 19, 2027: Board votes to award Social Services Funding

April 2027: Funds will be allocated to awarded Agencies.

Board members will be asked their recommended amount for the organization's allocation. The allocation shall not exceed amount requested.

A Board member will recuse himself/herself in the event of a conflict of interest with a grant applicant.

Cuba Township Application for Funding 2027

1. Name of Agency:
   _____
2. Proof of not-for-profit status: (attach)-Certificate of Good Standing available through Secretary of State.

Date of Incorporation: _____

Main Address:

Phone Number: _____ Email: _____

Contact Person: _____ Title:_____

3. Briefly Describe your organization and proposed programs for funding:

4. Amount Requested: _____

5. Percent Change from last year: _____

6. Percent of Agency Total Budget: _____

Please attach a copy of your budget and return with the completed application. This should include a detailed list of incoming revenue. (Please list any governmental, public, or private sources of funding your organization currently receives, including the total amount, frequency, and duration of support)

7. What is the total number of clients served this year? _____

8. What is the total number of Cuba Township residents directly served this year? _____

9. What is the total number of direct hours for Cuba Township Residents this year? _____

10. How can those numbers be verified?

11. Provide a breakdown of your organization's total number of staff, including salaries, titles, and positions

12. Have you ever received township funding? _____ If yes, specify dates and amounts:

13. What is your primary service area? Circle all that apply. Youth Public Safety Seniors Medical Social Services Drug/Alcohol Education Community Service Health

14. Do you charge for your services? _____ Do you use a sliding fee scale? _____

15. Please explain how fees are determined.

16. Do you refer to or use services from other township agencies? If so, please describe:

17. Please describe how your organization plans to utilize the requested funding from Cuba Township.

18. How were the Township funds utilized from the previous years? Please specify details:

19. Do you receive State funding? _____ Any changes to funding recently?

20. Please provide the total amount of funding received from other agencies and what percentage that amounts to in comparison to your total budget?

21. Please explain any changes that have occurred in your agency in the past year. (Ex. new programs, leadership, expansion of programs or the facility)

22. Describe any new fundraising efforts this year. Please explain.

23. Please indicate local statistics pertaining to the Cuba Township area that would support the need in Cuba Township for the services you provide.

I hereby certify that I am authorized to execute this application on behalf of the organization listed below and that statements contained herein are true and accurate.

Name of Applicant Organization: _____

By: _____

Authorized Representative

Printed Name: _____

Title: _____

Date: _____

SUBSCRIBED and SWORN to before me this _____ day of _____, 20_____.

_____

Notary Public