



BETTER TOGETHER GRANTS PROGRAM

2022 Grant Application Form & Reporting Requirements or apply online

Name of Resident-Owned Community (ROC):							
Name of per	rson completing this applica	tion:					
Number of h	nomes in the community:						
-	of the ROC – year of purchanyolved with other ROCs in y	ase, major accomplishments since purchase, ways your community Members your area, etc:					
Brief descrip	otion of the community:						
Project Coor	dinators:						
	Name:						
	Complete Mailing Address:						
	Phone:	Email:					
ı	Name:						
	Complete Mailing Address:						
	Phone:	Email:					
	Board of Directors:						
	Name:						
	Complete Mailing Address:						
	Phone:	Email:					

Project Type: _	Community	Rebranding	Member Engagement and Leadership Development
Define the prob	olem you're going to	o fix or how you plar	n to take advantage of an opportunity:
Describe your g	oal. What will you	accomplish?	
Describe the ke	y actions or steps ii	n the process of acco	omplishing your goal:
	ources – for examp ut getting them?	le, people, money, a	nd materials – will you need to complete your project and how
When will the p	roject be complete	d?	
Do you agree to	send before, durir	ng and after pictures	of the project?YesNo
Diagram and and			

Please complete budget breakdown chart:

Project Budget Breakdown	Dollar Amount	Details/Explanation	
Funding			
Better Together Grant:			
Other:			
Total Funding Needed:			
Costs			
Materials:			
Contracts:			
Other:			
Total Cost of Project:			
Surplus/(Deficit)	_		

Local Media (please list local newspa	ipers)		
By signing below, if approved, you ar Together Grants Program at:	re agreeing to send a brief re	eport and pictures to ROC Associat	tion Better
6 Loudon Rd. Suite 501 Concord, NH 03301			
Or email to: grants@rocusa.	org		
Updates of your project will be poste	ed to <u>www.myROCUSA.org</u> i	n the "News" section.	
Application deadline: July 24, 202	22		
Approval announcement: August	1, 2022		
Project completion deadline: Jun	ne 30, 2023		
Duly authorized by a vote of the Boaresponsibility for undertaking and co			
to the resident association.		5 5	,
Project Coordinators:			
Name	Signature	Date	
Name	Signature	Date	
Chair of the Board of Directors:			
Name	Signature	Date	