



## **Town of Yucca Valley Partnership Funding Program Guidelines and Instructions Fiscal Year 2025-26**

### **Partnership Funding Program Background**

The goal of the Partnership Funding Program is to provide supplemental funding opportunities for various non-profit community groups who enhance the Quality of Life in Yucca Valley through programs or services. Applications requesting Measure Y funding must meet the Revenue Measure Oversight Commission's general policy guidelines. All applications will be scored and those with the highest score will be recommended for consideration of funding by the Town Council.

### **Funding Available and Minimum Eligibility Requirements**

The available funding for the program varies annually, and must be applied for by a public entity, service organization or other private non-profit organizations. Measure Y applications must support a minimum partnership request of \$5,000. All partnership funding will be awarded by the Town Council at a public meeting. Each applicant will be notified of the meeting date and time.

### **Eligible Public Service Programs**

The California constitution prohibits the Town from appropriating and expending public funds for private purposes. Funding is allowable, however, for program support that serves a public purpose. Therefore, any application submitted must include a specific description of how the proposed program or service will serve a public purpose. Funding will not be available for capital projects through this program.

While not limited to such, prioritization will be generally aligned with the impact of the program(s) offered, number of potential participants, demonstrated history with and within the Town, availability of alternative or competing programs, assistance in meeting an identified need, degree of financial dependence on the requested funding, financial and organizational stability of the program applicant, and other criteria as may be appropriate.

### **Applications for Partnership Funding**

At this time, the Town is accepting applications for the 2025-2026 program year. Applications for Public Services Programs are available at:

Town of Yucca Valley  
57090 29 Palms Highway  
Yucca Valley, CA 92284  
(760) 369-7207 ext. 235

These application forms and instructions can also be accessed on the Town's website at <http://www.yucca-valley.org>. For any questions, contact **Iryna Hess, Accounting Technician II** by email at [ihess@yucca-valley.org](mailto:ihess@yucca-valley.org) or by calling the number above.

**The deadline for submitting applications is Friday, April 4th 2025, no later than 5:00 p.m. (Application forms must be received by the Town no later than 5:00 p.m. PST at the office listed above, or must be postmarked by this date).**



**Town of Yucca Valley  
Partnership Funding Program Guidelines and Instructions  
Fiscal Year 2025-26**

**Instructions**

Please answer each item of the two page application. If an item is not applicable, please write in an "n/a" so that application is complete. Any incomplete applications will be returned.

Please include all required attachments to your application. If a recent audit or financial report is not available, a federal tax return for your fiscal year ending within the last 2 years is acceptable, however, a financial statement or audit is preferred.

Additional sheets may be attached to the application if needed. If you prefer to attach your responses for Page 2, please write "see attached" in the box and add your attachments.

If you have any questions, or need further clarification on specific line items, please contact

**Iryna Hess, Accounting Technician II**

ihess@yucca-valley.org

**760-369-7207 ext 235**

**Jordan Gumbish, Finance Manager**

[jgumbish@yucca-valley.org](mailto:jgumbish@yucca-valley.org)

**760-369-7207 ext 229**

All applications and supporting documents should be returned to the following address:

Town of Yucca Valley  
Attn: Jordan Gumbish  
57090 29 Palms Highway  
Yucca Valley, CA 92284

We appreciate your desire to provide services to the residents of the Town of Yucca Valley. We look forward to working with you to make Yucca Valley a great place to live.



**Town of Yucca Valley  
2025-26 Partnership Funding Application**

|                     |                          |                          |
|---------------------|--------------------------|--------------------------|
| _____               |                          |                          |
| Agency/Organization |                          |                          |
| _____               |                          |                          |
| Mailing Address     |                          |                          |
| _____               | _____                    | _____                    |
| City                | State                    | Zip                      |
| _____               | <input type="checkbox"/> | <input type="checkbox"/> |
| Agency Phone Number | Non-Profit               | Other                    |

|                       |                                 |
|-----------------------|---------------------------------|
| _____                 | _____                           |
| Contact Person        | Title                           |
| _____                 | _____                           |
| Contact Phone Number  | Contact Phone # (Cell or Other) |
| _____                 |                                 |
| Contact Email Address |                                 |

|   |                   |
|---|-------------------|
|   | <b>FY 2025-26</b> |
| <b>Anticipated Agency Budget</b>                  | \$ _____          |
| <b>Amount Requested from Town of Yucca Valley</b> | \$ _____          |

Describe the overall project or program for which funds are requested (25 words or less):

Public purpose of project/program to the residents of the Town of Yucca Valley:

|  |                                      |
|--|--------------------------------------|
| Specific program(s)/service(s) to be funded: | (Provide Details on Attached Form A) |
| 1 _____                                      | \$ _____                             |
| 2 _____                                      | \$ _____                             |
| 3 _____                                      | \$ _____                             |

- Required Attachments:
- Copy of 501(c)3 incorporation papers
  - Current list of agency board of directors (w/ contact info.)
  - Project and Program Details (Attachment A)
  - Copy of recent Audit or Financial Report

|                   |              |
|-------------------|--------------|
| _____             | _____        |
| <b>Signature</b>  | <b>Date</b>  |
| _____             | _____        |
| <b>Print Name</b> | <b>Title</b> |



**Town of Yucca Valley  
Partnership Funding Program  
Attachment A: Project and Program Details**

**2025-26 Request**

*Please provide details about how the 2025-26 Town of Yucca Valley partnership funding request would be used if approved, and the public purpose of the program/service. Attach additional sheet(s) if necessary.*

**Other Services Requested from the Town of Yucca Valley**

*List any other anticipated requests such as meeting rooms, event support, etc. (Additional application and review of other service request may be required.)*

- 1 \_\_\_\_\_
- 2 \_\_\_\_\_
- 3 \_\_\_\_\_
- 4 \_\_\_\_\_