



Financial Services Department Community Investment Application 2027

All applications must be received on or before **November 16th, 2026**.

The Community Investment Fund (CIF) expands El Paso County services by funding local 501(c)(3) organizations that advance County goals in entrepreneurship, workforce development, veteran support, and homeless services. CIF strengthens community capacity to improve residents' **economic well-being, health, and safety**.

Purpose: CIF supports programs that extend County impact through four focus areas:

- **Entrepreneurship & Business Incubation** – This category supports programs that foster entrepreneurship, innovation, and early-stage business development. Eligible initiatives include incubators, accelerators, and entrepreneurial support organizations that provide startups with mentorship, technical assistance, access to capital, and collaborative workspaces. Funding is intended to strengthen local entrepreneurial ecosystems, accelerate the growth of innovative companies, and contribute to long-term economic vitality.
- **School based Workforce Development:** Skilled Trades Training Support for school- based pre-apprenticeship initiatives that deliver industry-recognized credentials, experiential training, and job placement pathways in high-demand construction trades. Projects should integrate competency-based curricula (e.g. PACT), safety certification, skill mastery, and structured employer engagement to prepare youth for immediate entry-level employment and longer-term career growth.
- **Military Liaison & Veteran Navigator Support** – Initiatives establishing or enhancing liaison/navigator roles that connect service members, veterans, and families to benefits, healthcare, employment, education, and community resources through outreach, service coordination, and cross-agency collaboration.
- **Homeless Support Services** – Low-barrier, community-based programs providing shelter, meals, case management, employment training, and placement services to stabilize individuals currently experiencing homelessness and support advancing them toward long-term housing and self-sufficiency.
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Eligibility: Applicants must:

- Be **located in El Paso County**
- Hold **501(c)(3)** nonprofit status
- Align with at least one **CIF focus area**
- Demonstrate **measurable outcomes** that extend County services
- Maintain **strong performance** for continued funding
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Application & Review: Submit the **online CIF Application** with:

- The most recent IRS Form 990, 990-EZ, or financials (if exempt).
- **Line-item funding budget**
- (Returning grantees) **Prior outcomes and annual evaluation**
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Incomplete applications are ineligible. Funding is competitive and based on available resources. Applications are reviewed for alignment, impact, and performance capacity.

Awarded grantees must submit **quarterly reports** (Apr 30, Jul 31, Oct 31) and a **year-end impact report** (Jan 31).

Questions on this application should be emailed to: CommunityInvestment@ElPasoCo.com

Primary Contact Information

1. First Name *

2. Last Name *

3. Address *

Address, City, State, Zip

4. Work Phone *

5. Cell Phone *

6. Email Address *

Please enter an email

Organization's Information

7. Organization Name *

8. Organization Address *

Address, City, State, Zip

9. Number of years operating in El Paso County *

The value must be a number

10. Year Founded *

The value must be a number

11. Federal Identification Number *

(for check issuance purposes only)

12. Legal Form Under Which Business Operates *

- ☐ Proprietorship
- ☐ Partnership
- ☐ 501(c)(3) Nonprofit
- ☐ Other

Organization's Information Continued

13. After affirming your application, you will be asked to submit your most recent Form 990, 990-EZ, or Financials if exempt from filing. *

If you do not file a 990 or 990 EZ, you should mark "Exempt". All others should mark "990 Filer". Please reply to the email you will receive after submission of this application and attach your most recent 990, 990-EZ, or Financials.

☐ Exempt

☐ 990 Filer

14. Organization's Mission, Vision, and Values *

15. Program Name *

16. Amount of Request *

Enter up to \$99,999

Number must be between 1 ~ 99999

17. If we are unable to grant your full request, what is the minimum amount that you would be willing to accept that would still allow your project to be viable? *

Enter up to \$99,999

Number must be between 1 ~ 99999

18. Which category best describes your proposed initiative? *

Please select one of the four available categories that directly amplify the County's capacity to improve the economic well-being, health and safety of residents.

- ☐ **Entrepreneurship & Business Incubation**-Supports programs that foster entrepreneurship, innovation, and early-stage business development. Eligible initiatives include incubators, accelerators, and entrepreneurial support organizations that provide startups with mentorship, technical assistance, access to capital, and collaborative workspaces.
- ☐ **School based Workforce Development**-Skilled Trades Training Support for school- based pre-apprenticeship initiatives that deliver industry-recognized credentials, experiential training, and job placement pathways in high-demand construction trades. Projects should integrate competency-based curricula (e.g. PACT), safety certification, skill mastery, and structured employer engagement to prepare youth for immediate entry-level employment and longer-term career growth.
- ☐ **Military Liaison & Veteran Navigator Support**-Initiatives connecting service members, veterans, and families to benefits, healthcare, employment, education, and community resources through coordinated outreach,
- ☐ **Homeless Support Services**- Low-barrier, community-based programs providing shelter, meals, case management, employment training, and placement services to stabilize individuals currently experiencing homelessness and support advancing them toward long-term housing and self-sufficiency.

Description of request

19. Please provide an overview of the project / program for which funds are requested. *

20. If the project is not awarded the minimum amount requested from the Community Investment Fund, how will the project be affected? *

Project Impact, Outcomes and Alignment with County Goals

21. How will this funding provide the greatest positive impact for El Paso County. *

Explain how our funds will be used to further a valid public purpose. This should include a description of how this program fulfills a need or service gap in services. Describe how residents will be impacted.

22. How will success be measured? *

Provide specific output and outcome measures that will show the efficacy of the program. What other key performance indicators will be used to determine the effectiveness of the program?

23. How will this funding support the goals of the El Paso County strategic plan? *

For Reference: The Strategic Plan focuses on four key strategic goals: Investing in infrastructure, Strengthening public trust, Enhancing service delivery & Supporting community health and safety.

24. Please detail the intended outcomes of the project / program *

25. What output measures will you track to determine if outcomes are achieved? *

Prior Funding

26. Has this Organization received Community Investment Funding before? *

List Year; Amount; Project Name (include last 5 years and use one line per year)
e.g. 2019; \$99,999; Project/Event

27. Has this Organization received funding from other El Paso County Government sources? *

List Year; Amount; El Paso County Agency (include last 5 years and use one line per year)
e.g. 2019; \$99,999; Human Services

28. Are you requesting or receiving funds from other sources for this proposed funding request? *

Source; Amount Requested/Received; In-Kind Value Requested/Received

29. How will this grant fill a need that your budget cannot address otherwise? *

Recognition of El Paso County For Its Sponsorship

30. Please provide a summary outlining how the organization will recognize El Paso County for its sponsorship and how the County logo will be used. *

Submission

31. Acknowledgement and Authorization *

By submitting this application:

- You certify that all answers given herein are true and complete.
- You understand that false or misleading information provided in this application may result in a rejection of sponsorship.
- You will attach your most recent 990, 990-EZ, or Financials and a detailed budget for the amount requested to the confirmation email you will receive after submittal of this application.
- You understand that funding is not guaranteed and expressly subject to availability.
- You authorize the County to conduct an analysis of all statements contained in this application for consideration of sponsorship and are aware that the County may contact the primary contact listed for additional documentation, as may be necessary to arrive at a final decision.
- You understand that the County reserves the right to approve or reject any request for sponsorship at its discretion.
- If approved, you will provide quarterly reports and a year-end report as to how the funding was utilized. Year-end reports are due by January 31st.

Please note: Per the Colorado Constitution Article XXIX § 3(2), local government officials and government employees are prohibited from accepting or receiving any gift or other item(s) of value greater than the adjusted gift ban dollar limit in any calendar year. If you have questions concerning the provision of tickets to events, merchandise, or items that may go over the gift ban amount, please contact the Administrative Assistant to the County Administrator at (719)520-6391.

☐ I have read and agree to the terms

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