



# 2025 Arbor Week Grant Application

California ReLeaf staff encourages all applicants to carefully read our California Arbor Week Grant Guidelines on our website prior to submitting an application to learn about eligibility and grant requirements.

Visit our website to register or watch the recording of our Grant Informational Webinar that is scheduled for November 13th and/or sign up for our technical assistance office hours.

All applications must be submitted prior to December 20th at 3 p.m. We will not accept late applications.

**\*\*PLEASE NOTE\*\***

Our online application form does not allow you to save in-progress applications. We recommend that you develop your application answers using a word processing application and transfer them to the online application when you are ready to submit them.

**Questions?**

Please contact Victoria Vasquez, California ReLeaf's Grants & Public Policy Manager by email [grantadmin@californiareleaf.org](mailto:grantadmin@californiareleaf.org) or by phone 916-497-0035.

## Organization Information

**Organization Name \***

**Address \***

City

State / Province

Postal / Zip Code

**Grant Project Manager / Primary Contact Name \***

First Name

Last Name

**Job Role / Job Title \***

**Email \***

example@example.com

**Cell Phone Number \***

Please enter a valid phone number.

**Secondary Contact Name \***

First Name

Last Name

**Secondary Contact Job Role / Job Title \***

**Secondary Contact Email \***

example@example.com

**Secondary Contact Phone Number \***

Please enter a valid phone number.

**Alternative Phone Number**

Please enter a valid phone number.

## Nonprofit Status

**Grant Amount Requested \***

\$2,500

\$5,000

**Is your organization a 501(c)(3) nonprofit? \***

Yes

No, our community group has a fiscal sponsor

**If yes, what is your nonprofit's FEIN number? \***

**If you are not a 501(c)(3) nonprofit, what organization is your fiscal sponsor? \***

Organization Name

**Fiscal Sponsor Contact Name \***

First Name

Last Name

**Fiscal Sponsor Contact's Job Title or Role \***

**Fiscal Sponsor Contact's Email Address \***

example@example.com

**Is your nonprofit or fiscal sponsor's nonprofit in good standing with the State of California? (Not sure? Visit the California State Attorney General's Registry Search Tool.**

**<https://rct.doj.ca.gov/Verification/> \*) \***

Yes

No

**If your nonprofit, or your fiscal sponsor is not in good standing, please explain.**

**Fiscal Sponsor Phone Number \***

Please enter a valid phone number.

**Fiscal Sponsor nonprofit's FEIN number \***

## Funding Request and Project Details

**Dates the the events will take place (months if exact dates are not known yet). \***

To be eligible for this grant your project must be located within Southern California Edison's (SCE) Service Area.

**Please provide information about the location(s) of your project event(s). Please include zip codes, census tracks, and or physical addresses. \***

**What land type is your proposed project location(s)? - select all that apply: \***

- Publicly Owned Land (city, county, special district, school, etc.)
- Federally Recognized Tribal Land
- Private Property (residential, commercial, church, nonprofit, etc.)

If your proposed project is on publicly owned land or Federally Recognized Tribal Land, you must complete the Permission to Plant Form with the land owner.

**Planned Number of Events \***

**Will this project serve a low-canopy and/or low-income neighborhood? Please explain. \***

**How will this project benefit or serve a community need? \***

**Please summarize your project, including planned activities at planned locations and how the grant funding will be used. \***

**Number of trees to be cared for \***

**Please provide the tree species and size of the trees you anticipate planting. \***

**Number of trees to be planted \***

**Please provide a summary of watering and/or irrigation plan for the trees being planted. \***

**How do you plan to meet the utility sponsorship recognition requirement? \***

**Who will be responsible for the the ongoing watering, care, and maintenance over the life of the tree? \***

**We hope that these small grants provide a learning opportunity and invite you to practice skills in the areas of event planning and community outreach. Which areas do you plan to focus on? Please select at least two. \***

- In-person event(s)
- Online / Social Media Engagement
- Press/Media coverage
- Working with schools
- Working with elected officials
- Partnering with other community groups

- Tree planting and tree care will be new for us
- Community education about tree benefits / care / planting

**Number of schools to be engaged (estimate)**

**Social Media or other online platforms your organization uses for community engagement. Please include links or handles for social media accounts.**

e.g. e-Newsletter, Facebook, LinkedIn, Instagram, X, Threads, etc.

**Local Elected Official(s) to be invited**

**Name of local community newspaper(s)/outlet(s) to be contacted**

**Name of community partners**

**Final questions or thoughts?**

Submit