



GRANT APPLICATION FORM

Part I. REQUESTING ORGANIZATION INFORMATION

Date submitted _____

Organization name _____ Date established _____

Address _____

City _____ Zip _____ Telephone (____) _____

Chairman of the governing body and title _____

Contact person and title _____

Amount requested \$ _____ Total project budget \$ _____

Project duration from _____ to _____ When are funds needed? _____

Total operating expenses for the past fiscal year. \$ _____

What are the dates of the organization's fiscal year? _____

Number of full time employees ____ Number of volunteers ____

General description of organization and population served (including numerical estimates for last year) and principal geographic area of service. _____

Has the governing board approved a policy of non-discrimination with regard to age, race, religion, sex or national origin? yes _____ no _____

Does the organization have federal tax exempt status? yes _____ no _____

If no, please explain. _____

Has this request been authorized by the organization's governing board?

Yes (date) _____ no _____

This application must be signed by the president or another officer of the organization's governing body.

Signature

(Print name and title)

Date

Part II. Project Description

Describe your need for support from the Mequon Community Foundation including:
(Separate Attachment Requested)

- background of sponsoring organization
- concise description of specific program
- anticipated project outcomes
- project for which funding is sought
- description of population to be served, including numbers
- current budget and funding sources, including amount raised to date, amount needed to complete project, and amount requested
- time requirements from project start, to completion

Part III. Submit the following attachments with the completed proposal:

- The organization's officers and directors
- The most recent IRS form 990
- A copy of the IRS federal tax exemption determination letter

Mail to Mequon Community Foundation
 PO Box 52
 Mequon, WI 53092

If you have any question, please call:

Part IV. Foundation Notes:

Date received _____

Received by _____

Approved YES _____ NO _____

Comments: