

GENERAL SCF GRANT APPLICATION

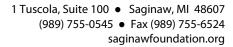
HOW TO APPLY:

- Review information & FAQs located on the SCF website.
- Contact SCF to discuss proposal and receive an editable grant application.
- Submit completed application electronically to <u>Kendra@saginawfoundation.org</u> no later than 11:59 p.m. on the due date or via mail postmarked by the due date.
- General SCF grant application due dates are February 1, June 1 & October 1.

COMPLETED APPLICATIONS SHOULD INCLUDE:

- 1) This completed & signed grant application form
- 2) Program/Project Narrative (See Program Narrative Guidelines)
- 3) Organizational Background (up to 2 pages)
 - Include a list of governing board members & a brief bio on key project/program staff.
- 4) Financial Information:
 - a. Most recent IRS 990 (first 2 pages only)
 - b. Applicant's current operating budget
 - c. Most recent year-to-date financial statement
 - d. Documentation substantiating project expenses (quotes, bids, etc.)
- 5) If appropriate, any additional attachments you feel would establish your organization's credibility or help clarify your program/project (letters of support, news articles, etc.)

E.I.N. #:	
Legal name of organization applying:	
· · · · · · · · · · · · · · · · · · ·	(This should be the same name as the one on the IRS tax determination letter)
Your organization's common name (if differ	rent than above):
Chief Executive Officer (name & title):	
Address:	City, State, ZIP Code:
Phone:	Email:
Website:	Facebook Page:
Contact person for this application (name &	title):
Address:	City, State, ZIP Code:
Phone:	Email:
• Has your governing board approved a poreligion, sex, handicap or national original	olicy which states your organization will not discriminate as to age, race, ?
Has your governing board formally appro	oved this project and authorized you to submit this application for funding? No Yes (date approved by board:)
APPLICATION AUTHORIZATION:	
Chief Executive Officer (Printed):	
.	Date:
Board Chair (Printed):	
Signature:	Date





PROGRAM/PROJECT INFORMATION

Your Organization's common name:	
Program/Project title:	
Amount requested :	Total project cost:
	Project end date:
Geographic area served by this project (ne	
1a. Estimated # of <u>direct</u> recipients th	nis project will serve:
1b. Who are the <u>direct</u> recipients? Explain. (No more than one sente	ence):
2a. Estimated # of <u>indirect</u> recipients2b. Who are the <u>indirect</u> recipients?Explain. (No more than one sente	
Executive Summary Provide a brief program/project overview an What is the project; why is it necessary; who is of what impact will the project have on the comm	coordinating the efforts; where is the project located; who will the project impact; and
Answer here:	



BUDGET INFORMATION

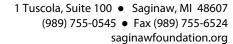
- In the tables below, itemize any pending or confirmed sources of revenue & estimated expenses relating to this request. Add additional lines if necessary.
- Total revenue must equal total expense to show how you plan on funding the project.*
- Answer the Budget Questions on the following page regarding funding and sustainability.
- Attach the following financial information when submitting the completed grant application:
 - 1) Most recent IRS 990 (first two pages only)
 - 2) Applicant's current operating budget
 - 3) Most recent year-to-date financial statement
 - 4) Documentation substantiating expenses (bids, quotes, etc.)

REVENUES FOR PROJECT:

Funding Source	AMOUNT	STATUS: CONFIRMED OR PENDING	
Saginaw Community Foundation (amount requested)	\$	Confirmed	X Pending
Organizational Funds Committed	\$	Confirmed	Pending
	\$	Confirmed	Pending
TOTAL PROGRAM/PROJECT REVENUE*:	\$		

EXPENSES FOR PROGRAM/PROJECT:

ITEM (MATERIALS, SUPPLIES, EQUIPMENT, ETC.)	ESTIMATED COSTS
	\$
	\$
	\$
	\$
	\$
	\$
TOTAL PROGRAM/PROJECT EXPENSE*:	\$





BUDGET QUESTIONS

How will funding from the Saginaw Community Foundation be used? Explain specific items and/or areas of the program/project that SCF funds would support. Limit to 120 words.

Littlit to 120 Words.	
Answer here:	
	project be impacted if awarded <i>partial grant funding</i> from SCF?
	project be impacted if not awarded <i>any</i> grant funding from SCF?
Limit to 120 words.	
Answer here:	
Describe the amount and	source of any internal funds dedicated to this project.
	u plan on securing additional funds to support this program/project? Who have you contacted
	u pian on securing additional funds to support this program/project: who have you contacted
or plan on contacting?	
Limit to 120 words.	
Answer here:	