



**Saginaw**

community foundation

1 Tuscola, Suite 100 • Saginaw, MI 48607  
(989) 755-0545 • Fax (989) 755-6524  
saginawfoundation.org

## 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 [Kendra@saginawfoundation.org](mailto:Kendra@saginawfoundation.org) 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 different 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 policy which states your organization will not discriminate as to age, race, religion, sex, handicap or national origin? ☐ No ☐ Yes (date approved by board: \_\_\_\_\_)

- Has your governing board formally approved this project and authorized you to submit this application for funding? ☐ No ☐ Yes (date approved by board: \_\_\_\_\_)

### APPLICATION AUTHORIZATION:

Chief Executive Officer (Printed): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Board Chair (Printed): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



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## **PROGRAM/PROJECT INFORMATION**

**Your Organization's common name:** \_\_\_\_\_

**Program/Project title:** \_\_\_\_\_

**Amount requested :** \_\_\_\_\_ **Total project cost:** \_\_\_\_\_

**Project start date:** \_\_\_\_\_ **Project end date:** \_\_\_\_\_

**Geographic area served by this project** (neighborhood/township/city/county): \_\_\_\_\_

**1a. Estimated # of direct recipients this project will serve:** \_\_\_\_\_

**1b. Who are the direct recipients?** \_\_\_\_\_

**Explain.** (No more than one sentence): \_\_\_\_\_

**2a. Estimated # of indirect recipients this project will serve:** \_\_\_\_\_

**2b. Who are the indirect recipients?** \_\_\_\_\_

**Explain.** (No more than one sentence): \_\_\_\_\_

### **Executive Summary**

Provide a brief program/project overview answering the following:

*What is the project; why is it necessary; who is coordinating the efforts; where is the project located; who will the project impact; and what impact will the project have on the community (no more than a paragraph in length).*

Answer here:



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**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)	\$	<input type="checkbox"/> Confirmed	<input checked="" type="checkbox"/> Pending
Organizational Funds Committed	\$	<input type="checkbox"/> Confirmed	<input type="checkbox"/> Pending
	\$	<input type="checkbox"/> Confirmed	<input type="checkbox"/> Pending
	\$	<input type="checkbox"/> Confirmed	<input type="checkbox"/> Pending
	\$	<input type="checkbox"/> Confirmed	<input type="checkbox"/> Pending
	\$	<input type="checkbox"/> Confirmed	<input type="checkbox"/> Pending
	\$	<input type="checkbox"/> Confirmed	<input type="checkbox"/> Pending
	\$	<input type="checkbox"/> Confirmed	<input type="checkbox"/> Pending
	\$	<input type="checkbox"/> Confirmed	<input type="checkbox"/> Pending
	\$	<input type="checkbox"/> Confirmed	<input type="checkbox"/> Pending
<b>TOTAL PROGRAM/PROJECT REVENUE*:</b>	<b>\$</b>		

**EXPENSES FOR PROGRAM/PROJECT:**

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



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## **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.*

Answer here:

**How would this program/project be impacted if awarded *partial grant funding* from SCF?**

**How would this program/project be impacted if not awarded *any grant funding* from SCF?**

*Limit to 120 words.*

Answer here:

**Describe the amount and source of any internal funds dedicated to this project.**

**Have you secured or do you plan on securing additional funds to support this program/project? Who have you contacted or plan on contacting?**

*Limit to 120 words.*

Answer here: