ACCESS AND OPPORTUNITY GRANT PROGRAM 2025
GRANT APPLICATION

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

SCF
Saginaw
community foundation

Saginaw Community Foundation
Access and Opportunity Grant Program

HOW TO APPLY

- Review information & FAQs located on the SCF website.
- Contact SCF to discuss proposal, obtain an application number, and receive an editable grant application.
- Application due October 31, 2025.
- Submit completed application electronically to brian@saginawfoundation.org no later than 11:59 p.m. on October 31 (preferred) or via mail postmarked by October 31.

COMPLETED APPLICATIONS SHOULD INCLUDE:

- This completed & signed grant application form
- Documentation substantiating project expenses (quotes, bids, etc.)
- Supporting Documentation (research, letters of support, etc. – if applicable)

APPLICANT INFORMATION

SCF Grant Application #: _____   **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:** _____

GRANT APPLICANT SIGNATURES

Primary Signature (Board Chair, CEO, Project Leader):

Name & Title (Printed): _____

Signature: _____   Date: _____

Secondary Signature (Active Project Supporter):

Name & Title (Printed): _____

Signature: _____   Date: _____

ACCESS AND OPPORTUNITY GRANT PROGRAM 2025
GRANT APPLICATION

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

SCF
Saginaw
community foundation

PROPOSAL INFORMATION

Project title: _____

Amount requested (up to $5,000): _____ **Total project cost:** _____

Project start date: _____ **Project end date** (by 11/30/2026): _____

Project Details
Provide a description of the project answering the following:
What is the project; list project goals and objectives; why is it necessary; who is coordinating the efforts; who will the project impact; what impact will the project have on diversity, equity, inclusion, belonging and/or justice in the community.

Answer here (Limit two pages):

ACCESS AND OPPORTUNITY GRANT PROGRAM 2025
GRANT APPLICATION

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

SCF
Saginaw
community foundation

PROJECT BUDGET INFORMATION

- In the tables below, itemize all sources of project funding and project expenses. Please add additional lines if necessary.

- The total project revenue _must_ equal the total project expense. This explains how you anticipate funding the project.

- Attach documentation substantiating project expenses (bids, quotes, etc.)

REVENUES FOR PROJECT:

FUNDING SOURCE	AMOUNT	STATUS: CONFIRMED OR PENDING
Saginaw Community Foundation	$	Pending
Organizational Funds Committed	$	Confirmed
	$	
	$	
	$	
	$	
	$	
	$	
	$	
TOTAL PROJECT REVENUE:	$	

EXPENSES FOR PROJECT:

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

Supporting Documentation: Please attach any research, letters of support, etc. – if applicable.