

Scott Community Foundation

Women For Women Grant Application Cover Sheet

ORGANIZATION INFORMATION

Organization/Agency Requesting Grant: Contact and Title:	
City, State, and Zip	
Email Address:	Project Title:
FINANCIAL IN	NFORMATION
Approximate Number of Women/Girls se	erved by this project/program:
Time Period of project/program: From:	to:
Date when funds will be needed:	Total project/program cost: \$
otal amount of grant request (Grand Total o	f funding available is\$2,170) \$
Total grant requests frequently e	exceed the amount of available funding
Are you willing to accept a gr YES	rant less than your requested amount? NO
If yes, is there a minimum amount acce	ptable for the project/program to proceed?
\$	
Is your organization a 501 (c)(3)? YES agency/unit of government? (i.e. educational institution, church, city	NO. If No is your organization a public , county) YES NO
ignature of Executive Director or Equivale	ent Date

WOMEN FOR WOMEN MISSION

The Women for Women Fund was created with the purpose that Scott Community women will commit to an annual contribution of \$100 or more to build a permanently endowed fund that focuses on improving the quality of life and opportunity for Scott Community girls and women.

The Women for Women Fund is dedicated to increasing support for programs serving women and girls. The Women for Women Fund awards grant funding to programs that support:

- 1. Promotion of health and well-being for women and girls
- 2. Enhancing the lives of women and girls through improving the educational, social, cultural, health & civic resources of the community

REQUEST FOR FUNDS

Instructions: Using no more than two, $8\frac{1}{2}$ X 11 single-sided sheets of paper, please tell us about your project. Be sure to include the following and label the information by letter in your narrative:

- a. Brief description of your agency and the population you serve.
- b. In 100 words or less please summarize your project/program.
- c. Please describe how your agency will use the requested funds.
- d. How does this project/program directly support the mission of the Women for Women Fund?
- e. How did you determine the need for this project/program?
- f. How will you evaluate the success of your project/program?
- g. Please provide an itemized and prioritized budget for the project/program you are requesting funds for?
- h. Is the project/program cost greater than your request? If yes, how do you plan to raise the remaining balance?

Attach copy of your IRS 501(c)3 determination letter or evidence of public entity status.

Attach General Fund Grant Application Cover Sheet to your application

SUBMIT

Submit completed application with attachments and cover sheet on or before *September 26th*, *2017* to:

Scott Community Foundation 210 West 4th Street Scott City, KS 67871

Questions? Call the Scott Community Foundation at 620-872-3790, or send an email to julie@scottcf.org.