



APPLICATION FOR COMMUNITY FOUNDATION GRANT

Name of Organization _____

Mailing Address _____

Contact Person and Title _____

Phone _____ Fax _____

E-mail _____

Tax ID Number _____

1. Amount Requested _____

2. Please outline the general purpose of your organization and how Prophetstown area residents may benefit from your program (use additional sheets, if necessary)

3. Attach a copy of applicant's proposed budget and current financial statement of the organization.

4. Is the applicant organized as a non-profit organization under State and Federal laws governing charitable organizations? _____ If no, please explain.

5. Please attach a photocopy of the ruling or determination letter from the Internal Revenue Service regarding exempt status, private foundation status or grant-making status.

6. Are funds to be used for operating or capital expenditures? _____ If yes, please explain and enclose the specific budget for any capital project.

7. Please list other funding sources available to you and amount received from each, if applicable.

8. Please indicate the number of area participants who benefit from your program.

9. List the names, titles and addresses of the applicant's officers and governing board.

10. If the applicant is controlled by, related to, connected with, or sponsored by another organization, please identify the organization and explain the connection.

I hereby acknowledge the above information is correct and I am authorized to make application on behalf of the organization.

Date: _____

_____ Name

_____ Title

RETURN APPLICATION TO:

Funding New Beginnings Community Foundation
Attention: Nick Emmerson
P.O. Box 180
Geneseo IL 61254
309-944-0580
309-944-0582 (Fax)
Website: farmersnationalbank.bank