

# GREATER SAUK COMMUNITY FOUNDATION

600 W. CHESTNUT STREET, PO BOX 544, BARABOO WI 53913  
608-355-0884 WWW.GREATERSAUK.ORG DIRECTOR@GREATERSAUK.ORG

## GRANT APPLICATION

### ORGANIZATIONAL INFORMATION

Name of Applicant Organization: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Organization Director: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Contact Person for Project: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email address \_\_\_\_\_

Does the organization have tax-exempt status under Section 501(c)(3)? Yes \_\_\_\_\_ No \_\_\_\_\_

Organization's Employer Identification Number: \_\_\_\_\_

If not 501(c)(3), please explain: \_\_\_\_\_

Date established: \_\_\_\_\_ Number of employees: \_\_\_\_\_ Number of volunteers: \_\_\_\_\_

General description of organization, mission, population served, and principal geographic area of service:

\_\_\_\_\_  
\_\_\_\_\_

Dates of the organization's fiscal year: \_\_\_\_\_ Endowment/Reserve Funds \$ \_\_\_\_\_

Total operating expenses for the **past** fiscal year \$ \_\_\_\_\_ **Current** year budget \$ \_\_\_\_\_

### PROJECT INFORMATION

Project Title: \_\_\_\_\_

Amount requested: \_\_\_\_\_ Duration of the project: from \_\_\_\_\_ to \_\_\_\_\_

Total project budget: \_\_\_\_\_ When are funds needed? \_\_\_\_\_

Who will directly benefit from project: \_\_\_\_\_

Number of people to be served by this project: \_\_\_\_\_ Geographical location of people to be served:

\_\_\_\_\_  
Is this project new or continuing? \_\_\_\_\_ If continuing, when started? \_\_\_\_\_

In which category does the project fit: (check one) 1) Youth \_\_\_\_\_ 2) Human Services \_\_\_\_\_  
3) Health \_\_\_\_\_ 4) Arts/Culture \_\_\_\_\_ 5) Environmental \_\_\_\_\_ 6) Other \_\_\_\_\_

Has the governing board approved a policy that states that the organization does not discriminate as to age, race, religion, sexual orientation, disability or national origin? Yes \_\_\_\_\_ No \_\_\_\_\_

Has the organization's governing body authorized this request? Yes \_\_\_\_\_ No \_\_\_\_\_ When? \_\_\_\_\_

This application must be signed by the president or another officer of the organization's governing body:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name and Title

# OUTLINE FOR PROPOSAL

Applicants seeking funds for projects should use this outline and present the request clearly and concisely. Please adhere to the recommended space limitations.

## I. PROJECT SUMMARY (Do not exceed one page)

- Briefly summarize the proposed project.
- Identify the problem or need to be addressed, the project's objectives, and the proposed strategy for achieving them.
- Identify other principal sources of support and any project partners.
- Describe how you plan to announce and promote your proposed project. Your plan should include opportunities to inform the community about your project as well as recognize the Greater Sauk Community Foundation.

## II. PROJECT BUDGET (Do not exceed one page)

Present a line item budget including project expenses and income sources, identifying how funds requested from the Community Foundation would be spent if requesting partial support.

## III. SUBMIT THE FOLLOWING ALONG WITH THE APPLICATION FORM AND PROPOSAL:

- Complete list of the organization's current officers and board of directors, including affiliations.
- A copy of your organization's IRS 501(c)(3) determination letter, if applicable.

*Note: We do not require your organization's financial statements as part of your application, but please be prepared to provide them on request.*

**Spring applications must be received by March 1; deadline for fall applications: September 1.**

**Scan your application documents into one PDF attachment and email to:  
director@greatersauk.org**

Before you email your application, please check carefully that you have fully adhered to the requirements. **INCOMPLETE APPLICATIONS CANNOT BE CONSIDERED.**