Box 25 Elkhorn, MB ROM ONO

GRANT APPLICATION FORM

All applications and required support material must be submitted to the above address on or before March 31st.

IMPORTANT: Please ensure that application form is legible. Please complete the checklist below to ensure all supporting documents are included with the completed grant application.

- o Completed and Signed Application form
- o Copy of your Organization's most recent financial statement
- Sponsor Agency Letter of Support (if applicable)
- Detailed project budget indicating anticipated income and expenses

(NOTE: If these above documents are not attached to application please explain)

Name of Organization:		
Address:		
Contact Person:	Title:	
Telephone:	Cell Phone:	
Email:		
	ofit Organization: (Yes/No)	
Charitable Registration Nun	nber:	
-UK - Sponsor Agency for Pi And Sponsor Agency Registi	roject: ration Number:	
	Support is Required and MUST be included v	
Project:		
Total Project Cost:	Amount Requested:	
Project Start Date:	Project Completion Date:	

Please describe the project that is the subject of this application and the community need for this project			

2. PROJECT BUDGET:

Please give a detailed outline of your proposed project budget.

Estimated Project Expenses		
Item		Amount
		\$
		\$
		\$
		\$
		\$
		\$
	Total	\$

Please specify all other sources (Government, Foundations, Donations, etc.) of funding for project application.

Sources of Revenue	Confirmed	Unconfirmed
	\$	\$
	\$	\$
	\$	\$
	\$	\$
Requested from Elkhorn & Area Foundation	\$	\$
Allocated Funds on Hand re: Project	\$	\$
TOTAL	\$	\$
	TOTAL \$	

AUTHORIZATION:

		oard of Directors indicating awarenes			
of the application request an					
31g11acu1e	Hue	Date			
Signature	Title	Date			
GRANT RECOGNITION					
In the event your organization is awarded a grant from the Elkhorn & Area Foundation please consider making a public announcement. Such notices encourage support for our Foundation and therefore strengthen our mission of community philanthropy.					
Please forward photos in the digital format to the Foundation upon project completion to feature your grant story and/or photo in our annual report, newsletter and/or website. If the photos are confidential, please advise us — otherwise please ensure that the subject(s) in the photo have provided you with approval for you to share them publicly.					
Providing a unique oppo	ortunity for each of us to in	vest in the future of our community			
FOR OFFICE USE ONLY					
Application No	Amount Requested	Date			
Grant Amount Approved	Date				