

SWR Grant Application Form

Name of Organization _____

Contact Person who will be administering the grant: Name _____

Contact Title/Office _____

Address _____

Contact Telephone number _____

Contact E-Mail Address _____

Has the applicant received a ruling or determination letter from the Internal Revenue Service for any of the following:

a. Tax exempt status 501(c)(3) Yes ___ No ___

b. Private Foundation Status Yes ___ No ___

Attach a photocopy of each such letter.

Describe the organization's purpose and activities in general:

Attach a copy of the organization's proposed budget for the year in which grant funds are to be used and a copy of the preceding year's financial statements.

Is the applicant organization controlled by, related to, connected with, or sponsored by another organization? Yes ___ No ___

If yes, please identify the organization (including purposes and activities) and explain the relationship:

List (or attach a list of) each member of the organization's governing board including name, title/office and address:

Amount of Grant requested: _____

Explain in detail how the grant will be used.

