

Western Lane Community Foundation

GRANT APPLICATION INSTRUCTIONS

Applications are available at www.wlcfonline.org after October 1st. Completed applications must be POSTMARKED or RECEIVED by Western Lane Community Foundation by January 15th

Basic Application Materials:

Your application should consist of all of the materials listed below, arranged in the following order:

- o The Community Foundation's Application Form -minus this instruction page printed on 8 ½ X 11 paper, single sided and stapled together
- o Any additional pages used to answer application questions. Please be complete but concise and limit additional answer pages to one page
- o A one page Budget for the proposed project. See page 6.
- o Letters of support are not required. If you submit letters, please do not include more than 3. Letters should be included with your application, not sent separately.
- o All questions must be answered. If a question is not applicable use "NA"
- o Submit one signed original of the basic application materials.

Submit your application materials to:

Western Lane Community Foundation

P.O. Box 1589 Florence, OR 97439

OR scan and email in PDF format to wlcf@wlcfonline.org

Review the Grant Guidelines for guidance on completing the Grant Application. You will be contacted by a member of our Board for further information about this grant request.

If a grant is awarded, you will be required to file a Grant Activity Report by August 31st of the grant year. If you fail to return the Grant Activity Form timely, you will be required to return the grant funds.

INCOMPLETE APPLICATIONS MAY NOT BE CONSIDERED

**Western Lane Community Foundation Grant Application
Postmarked or Received by January 15th**

ORGANIZATION INFORMATION	Name of Organization:	
	Mailing Address:	
	Street Address:	
	Phone Number:	
	Description of Organization:	
	CEO/Board Chair Name:	
	CEO/Board Chair Email:	
	Fiscal Year (month/year):	
	Tax ID Number:	
	Is this organization a 501(c)(3) corporation?	
	If not a 501(c)(3) corporation, what is the structure of your organization?	
	<input type="checkbox"/> I certify that all information included in this application is accurate and complete. <input type="checkbox"/> I understand that if funds are awarded, I am responsible for submitting a completed grant activity form by August 31 st or returning grant funds. <input type="checkbox"/> I understand and agree to notify WLCF if duplicate funds are received from another source.	
	Original signature of CEO or Board Chair	Printed Name of CEO or Board Chair

PROJECT INFORMATION	Contact Person:			
	Title:			
	Phone Number:			
	Email:			
	Name of Project			
	Project Summary:			
	Primary City/Town served:		Target Population:	
	Amount requested:		Total Project Budget:	
	Project start date:		Project end date:	
	Percent of where project beneficiaries reside	Florence:	Mapleton:	Deadwood: Other:

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PROPOSAL INFORMATION

1. What is the amount of grant requested? \$

- 2 .How will grant funds be used? (Check the appropriate line then describe the planned project or program.)
 - Special program
 - One time capital expenditure
 - Operating support

3. What community need would/does this grant address?

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4. What is the total cost of the project/program the grant will be used to support?

5. If all awarded funds from this grant will not be expended prior to August 31 of the year of receipt, explain why and when they will be expended.

6: If additional funds are required for this project or program, what is the source of additional funding?

Source:

Amount:

Current

Status:

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7. Is this a project that will require ongoing funding? If yes, how will it be funded in the future?

8. Are there other groups in the community with the same (or similar) mission or purpose? Please list. Provide details on the contacts you have made and any effort to coordinate the project or program with them, or your reasons for not doing so.

9. WLCF awards grant funds that are provided through community donations. If awarded, how would you publicly recognize Western Lane Community Foundation for providing funding for your grant?

Proposed Budget

	List things necessary for implementing your project	Amount of WLCF Grant funds used to pay for this project	Amount of your organization's funds used to pay for this project	Amount of other sources used to pay for this project	TOTAL
Equipment Furniture, and/or Fixtures					
Supplies					
In-Kind					
Other					
TOTAL					