

SOUTHLAKE WOMEN'S CLUB FOUNDATION, INC.
GRANT REQUEST APPLICATION
P . O . B o x 9 2 6 1 1
S o u t h l a k e , T X 7 6 0 9 2
8 1 7 - 4 2 1 - 6 S W C
artinthesquare@verizon.net

Grant Request Application Guidelines

1. All grant request applications must be postmarked by Friday, January 15, 2010, no faxes or hand deliveries please.
2. Submittals should only include what is requested. No extra information, such as notebooks, tapes, brochures, etc., allowed.
3. All requests should be typewritten.
4. Applicant/Agency must be a 501c3.
5. Funding must service Northeast Tarrant County.
6. Funding priorities: Children, Women and Families.
7. Requests will not be considered which fund job positions, salaries, fundraisers, administrative or office expenses, volunteer or employee recognition trips or award ceremonies.
8. Copy of IRS Charitable exemption letter.
9. Copy of most recent 990 tax form.
10. Copy of previous year, current year and proposed Agency/Applicant's budget.
11. List of Board members including phone numbers.
12. Sign, date and include phone number.

We recommend that you submit your application with a Certificate of Mailing to the address below:

Southlake Women's Club Foundation
Attention: Funding Chairman
P.O. Box 92611
Southlake, TX 76092

Grant selection and notification will take place in February 2010.

The exact amount of each grant will not be determined until after the event. Checks will be mailed by the end of June.

Selected beneficiaries will be assigned four Art in the Square volunteer slots at notification.

I. Applicant/Agency Information

Agency Name: _____
Address: _____
Telephone: _____
Fax: _____ **E-Mail:** _____
Contact Person: _____ **Title:** _____
Contact Person Phone No.: _____

Please complete the following as completely as possible:

1. Agency Mission Statement

2. Project Mission Statement of Requested Funds for 2010

3. Summary of Request (What specifically will the money be used for?)

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4. Agency Budget

- a. Total agency budget for current year \$ _____
- b. What percent of monies for the total agency budget are received from the following resources?
_____ Federal _____ State _____ Local Government
_____ Private _____ United Way _____ Special Events

_____ Other (Specify)

5. Project Budget

- a. Total project cost of project \$ _____
- b. Total SWCF funds requested for this project \$ _____
- c. Attach project budget

6. Grant Request History

Has a request for funding been submitted within the last 3 years to SWCF?

- 2009 Yes _____ No _____ Amount \$ _____
- 2008 Yes _____ No _____ Amount \$ _____
- 2007 Yes _____ No _____ Amount \$ _____

7. Needs Assessment

a. What specific community (children/family) needs will the project address?

b. How will the project address these needs?

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8. Client Information

- a. How many clients will be served by this project?
- b. What geographical areas will primarily be served by this project?

c. How will this project touch the Northeast Tarrant County Area? How many people will be affected in Northeast Tarrant County through this project/program?

9. Public Relations

What direct publicity or permanent recognition will be provided for the Southlake Women's Club Foundation as a result of this charitable donation?

10. Evaluation

a. What criteria have been established to evaluate the success of this project/program?

b. Who will have the responsibility for evaluating whether these criteria have been met and at what point?

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11. Funding Requests

a. What other sources are you approaching for this funding?

Applicant's Signature

Phone Number

Date

Title

Address

Please print applicant's name : _____

Revised 8/2009