

CHEBOYGAN COUNTY COMMUNITY FOUNDATION

GRANT APPLICATION

Applications for funds must relate to our mission which is to support projects which create jobs, improve local vocational educational opportunities, increase tourism visits, and expand retail and commercial offerings. Applications which do not meet at least one of these criteria must be denied.

Check applicable boxes. The project described in this application will:

Create jobs

Improve vocational educational opportunities

Increase tourism visits

Expand retail commercial offerings.

The Foundation does not make grants to:

- Organizations strictly serving outside Cheboygan County
- Religious activities or programs serving specific religious groups or denominations. However, faith-based organizations may submit applications if the project falls within our guidelines and serve a broad segment of the population or
- For expenditures already incurred.

Organization Information

Legal Name of Organization: _____

Mailing Address: _____

Telephone: _____ E-mail : _____

Name/Title of Person Submitting Application: _____

Phone Number: _____

Date of Application: _____

Is your organization a non-profit organization ____ Yes ____ No

If yes, is it an IRS 501(c) (3) Not-For-Profit? ____ Yes ____ No

If yes, what is your Tax ID#: _____

If yes, please attach your 501 (c) (3) IRS Confirmation letter.

Is your organization a for profit organization ____ Yes

If yes, is it a ____ corporation ____ sole proprietorship ____ partnership

____ LLC ____ other (describe) _____;

Who are the stockholders, owner, partners, members, directors as applicable _____

Has this organization ever applied for a grant from the Cheboygan County Community Foundation?

____ Yes ____ NO

If yes, date of application and purpose: _____

Request for Funds

Project Name: _____

Please state in one sentence the summary of the purpose of the request:

Total Cost of Project \$ _____ Amount Requested \$ _____

List individually other funding sources for this request. Include amounts and whether received, committed, or projected/pending:

Source #1 _____ Amount \$ _____ Pending ____ Received

Source #2 _____ Amount \$ _____ Pending ____ Received

Source #3 _____ Amount \$ _____ Pending ____ Received

Attachments

The following **MUST** accompany this application:

- Summary of Project Description – includes goals and objectives, cost estimates, etc. (1 page maximum)
- Financial Reports (i.e. profit and loss, balance sheet, annual report or bank statement)
- List of Board of Directors and Officers

The Foundation requires all grant recipients to publicize the Foundation's participation as a grantor
i how will you do that?

The information contained in this statement is for the purpose of obtaining funding from the Cheboygan County Community Foundation on behalf of the undersigned. The undersigned understands that the information provided herein is used to consider the request for funding, that the information provided is true and complete, and that the Foundation may consider this statement as continuing to be true and correct until a written notice of a change is provided. The Foundation is authorized to make all inquiries they deem necessary to evaluate the application made herein.

Cheboygan County Community Foundation takes the necessary steps to protect the information submitted but cannot guarantee complete confidentiality. All information submitted is maintained for inspection by auditors and is not returned to the organization.

Signature

Name of Organization: _____

Applicant's Representative's Signature: _____

Print Applicant Representative's Name/Title: _____

Date: _____

Email and Regular Mail application and related documents to:

Annette Eustice CPA, CGFM Principal

Rehmann

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(revised Nov. 17, 2020)