

**2016 GRANT APPLICATION**

**Submission Deadline: Friday, July 1, 2016**

**INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED**

**The following documents must be submitted with all applications to be considered.**

[ ] COMPLETED GRANT APPLICATION *(Must be typed into this form. No exceptions.)*

[ ] IRS 501(C)(3) DESIGNATION LETTER *(Required for consideration.)*

[ ] LIST OF CURRENT BOARD OF DIRECTORS/MANAGEMENT AND THEIR AFFILIATIONS

[ ] MOST RECENT AUDITED FINANCIALS

[ ] PROJECT BUDGET FOR THIS APPLICATION

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| **Name of Organization:**  |
| **IRS EIN:**  |
| **Organization Mailing Address:**  |
| **Suite/Floor Number:**  |
| **City, State, ZIP:** |
| **Name of CEO/Executive Director/President:**  |
| **Direct Phone:**  |
| **Grant Contact Person:**  |
|  **Title:**  |
| **Grant Contact Phone:**  |
| **Grant Contact Email:**  |
| **Name of Grant Preparer:** |
| **Grant Preparer Contact Phone:** |
| **Title of Grant Project:**  |
| **REQUESTED GRANT AMOUNT: $**       |
| **Name of Scottsdale Charros Representative Sponsoring Application:**  |

***Applications sponsored by a Charro will receive priority.***

 ***Charros Sponsor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***Please click the check boxes below to indicate which best describes your Funding Focus Area for this request:***

[ ]  Youth Sports [ ]  Western Heritage

[ ]  Youth Development [ ]  Scottsdale Community Development

[ ]  Youth Education [ ]  Serving Scottsdale Residents

[ ]  Other [ ]  Diverse or Underserved Population

 [ ]  Special Needs Children or Adults

**ABOUT YOUR ORGANIZATION**

1. **WHAT IS THE MISSION OF YOUR ORGANIZATION?**

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1. **GIVE A BRIEF HISTORY OR BACKGROUND OF YOUR ORGANIZATION.**

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**GRANT PURPOSE**

1. **PLEASE OUTLINE THE GRANT PURPOSE AND GENERAL ANTICIPATED OUTCOMES.**

***The Charro Foundation provides grants for general operating support or targeted for specific programs or services.***

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1. **PLEASE OUTLINE THE MEASURABLE OBJECTIVE(S) OF THE PROGRAM.** (Numbers served, percentage of serving a specific population, program does not duplicate other services and programs, etc.)

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1. **IF THIS GRANT IS FUNDED, WILL IT PROVIDE NAMING OPPORTUNITIES OR OTHER COMMUNITY RECOGNITION FOR THE SCOTTSDALE CHARROS AND THE CHARRO FOUNDATION? PLEASE EXPLAIN.**

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**FINANCIAL INFORMATION**

***The Charro Foundation will not fund projects where support is greater than 25% of total organization budget.***

1. **MOST RECENT FISCAL YEAR OVERALL ORGANIZATION OPERATING BUDGET $**
2. **TOTAL PROJECT OR PROGRAM BUDGET $:**

***Detailed Project Budget must to be attached to this document.***

1. **% OF FUNDS USED FOR ADMINISTRATIVE OVERHEAD FOR THIS PROJECT?** **%**
2. **WILL YOU ACCEPT PARTIAL FUNDING?** **[ ]  Yes** **[ ]  No**

***If YES, how will partial funding impact the project?***

1. **HAS THIS ORGANIZATION RECEIVED FUNDING FROM THE CHARRO FOUNDATION IN THE PAST?**

**[ ]  Yes Year(s):** **In the amount of $**

**[ ] No**

1. **IF THIS IS AN ONGOING PROGRAM FOR YOU ORGANIZATION, HOW WILL YOU SUSTAIN THE FUNDING NEEDED FOR THIS PROGRAM IN SUBSEQUENT YEARS?**

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1. **PLEASE LIST ADDITIONAL TOP FIVE FUNDING SOURCES NAME(S) AND DOLLAR AMOUNT(S) FOR THIS PROJECT OR PROGRAM:**

**Name of Funder or Event Dollar Amount**

|  |  |
| --- | --- |
|  | **$**  |
|  | **$**  |
|  | **$**  |
|  | **$**  |
|  | **$**  |

\*If you received funds in 2015, have you submitted or will you submit the required Grant Report detailing how the funds were or are being used?

[ ]  YES [ ]  Not Applicable

**FINAL GRANT DOCUMENT REVIEW & SIGNATURES**

1. **Please save a copy of this form for your records and submit with the following required attachments.**

**REMEMBER, APPLICATIONS MUST BE FULLY COMPLETED AND SUBMITTED WITH THE FOLLOWING FORMS TO BE ACCEPTED AND CONSIDERED FOR REVIEW:**

**[ ]** *By checking this box, the grant application preparer acknowledges that this application is accurate and complete.*

**Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CEO/Executive Director/Officer**

*If you have any questions, please email them to* *jason@openrangeaz.com* *with “2016 GRANT REQUEST” in the subject line of email. Completed grant applications may be e-mailed to* *beth@charros.com* *or sent to the address below (paper clips only, please no staples). Successful grantees will be notified in September 2016, with grants awarded October-November.*

***Thank You!***