



Community Response Grants

APPLICATION FOR URGENT/EMERGENT FUNDING

NAME OF ORGANIZATION: _____

ADDRESS: _____ POSTAL CODE: _____

TELEPHONE: _____ FAX: _____

E-MAIL: _____

CHARITABLE REGISTRATION NUMBER: _____

DATE OF INCORPORATION: _____ FISCAL YEAR: _____

BOARD CHAIRPERSON/PRESIDENT: _____

CONTACT PERSON: _____

JOB TITLE: _____

AGENCY/SPONSORING ORGANIZATION PURPOSE/MISSION STATEMENT:

TOTAL AMOUNT REQUESTED: \$ _____. A final accounting will be required.

SUMMARIZE THE SITUATION:

1. Description

Describe the community need or issue which would be addressed by this grant.

2. Financial

Provide a detailed revenue and expense budget for the request, including all associated income as well as direct and indirect costs. Indicate the status of any other current or pending grants/requests.

3. Attachments

Submit the following documents with the proposal:

- ◆ Most recent annual report and audited financial statements of your organization (or of the sponsoring organization);

4. General

Provide any additional information that you feel will help the United Way in deciding upon your request.