

APPLYING FOR A GRANT FROM THE
WOMEN'S COMMUNITY FUND

The Women's Community Fund (WCF) is unrestricted. That is, funds can be directed for capital and/or operating budgets. All fields of interest are eligible for consideration. The money allocated may be used to meet the needs of individuals under the sponsorship of an agency, organization or church.

To be eligible for consideration, the applying agency or organization must qualify as a 501(c)(3) entity under the Internal Revenue Service code. Management of the agency or organization should be in the hands of reliable, ethical and experienced personnel.

All submissions are subject to the process, procedures and rules of both the Women's Community Fund and the Newton Community & Healthcare Foundation.

FUNDING REQUESTS SHOULD NOT EXCEED \$5,000.

THE ATTACHED GRANT APPLICATION MUST BE RETURNED BY SEPTEMBER 20.

Upon review by the WCF Grants Committee, additional information may be requested for clarification.

Funding requests will be voted on at the WCF annual meeting in October. Recipients of funding will be notified in writing. Grant money will be disbursed by December 1.

If you have questions, please call:

Jan Saab, 316-283-3482

or Kathy Stucky, 316-283-4262

WOMEN'S COMMUNITY FUND
GRANT APPLICATION

GRANT APPLICATION DEADLINE SEPTEMBER 20

PLEASE LIMIT YOUR REQUEST TO THIS PAGE ONLY.

Organization name _____
Street address _____
Mailing address _____
City _____ State _____ Zip _____
Phone _____ Ext _____ Fax _____ E-mail _____
Executive Director/Contact Person _____
Project Director _____

Brief description of agency and population served:

State specific need to be met by funding request:

How does this request embody one or more of the following?

1. Urgency or immediacy to address a critical need
2. Excitement because it is a bold new venture
3. Creativity in providing new solutions to age-old problems

TOTAL AMOUNT OF FUNDING REQUESTED (No more than \$5,000): \$ _____

How much of the total request will be used for administrative costs? Please explain:

If you received a previous grant from WCF, please name the year(s) and how the grant was spent:

Have you applied for other sources of financial support? Please identify:

What will result if this request is not funded by WCF?

Signature _____