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Northeast Michigan Women's Giving Circle Grant Application

The Community Foundation for Northeast Michigan (CFNEM) welcomes your application for grants from the Northeast Michigan Women's Giving Circle Endowment Fund (WGC). Through this fund, grants will be made each year to support projects and programs that address issues important to women in Northeast Michigan. Recommendations for funding will be determined by a screening committee of donors to the WGC Endowment Fund.

Specific grant focus: projects or programs that support issues important to women in the northeast Michigan counties of Alcona, Alpena, Montmorency, and Presque Isle.

- Annual application deadline: July 1 (or the first regular business day in July)
- Eligible applicants: non-profit charitable organizations who are recognized under section 501 (c)(3) of the IRS code and who serve residents in the counties of Alcona, Alpena, Montmorency, and Presque Isle. (Schools, churches, and government agencies are also eligible.)
- Grants are not made to individuals.
- Maximum award amount: \$3,000 (to be used only for expenses incurred after final Board approval usually on the second Tuesday in September)
- Term of grant: one year (possible time extension of six months)

Please contact the CFNEM office if you have any questions. Fillable applications are available on our website at cfnem.org.



COMMUNITY FOUNDATION FOR NORTHEAST MICHIGAN (CFNEM) Women's Giving Circle (WGC) Grant Application Form

Date of Application:at cfnem.org, or postmarked by the f		• •
Legal name of organization applying:	(Name on IRS non-profit detern	nination letter and as stated on IRS From 990.)
EIN/Federal ID Number (required): _		
Year founded:	Current operating budget	::
Executive Director:	P	hone:
Project contact person and title:		
Address for primary correspondence	:	
City/State/Zip:	Day	phone:
Fax:	Email:	
Project name:		
Purpose of grant (one sentence):		
Dates of the project:	Amoun	t requested: \$
Total project cost:		
County or geographic area served: _		
Signature, project contact person		 Date
Printed name and title		-
Signature, president, executive direc	tor, or principal	Date
Printed name and title		-

PROJECT OVERVIEW

PROJECT OVERVIEW
Provide a brief description of your organization (i.e. years of operation, services provided).
Briefly describe your project/program. How does it address issues important to women and how many people will benefit? Are you collaborating with other organizations or using volunteers?

Project Budget: Specifically, what items or services will be purchased with a WGC grant? What other sources of income will be used to fund your project/program?	
*If you are awarded a grant, you will be asked to provide a brief final report of your project.	
A COMPLETE CFNEM GRANT APPLICATION INCLUDES THE FOLLOWING:	

- Completed application (with appropriate signatures)
- If necessary, additional documentation may be requested.
- Questions? Please call our office at 877-354-6881 (toll free) or email Inugent@cfnem.org.

Application submission instructions

- Applications must be submitted by July 1 using the cfnem.org online form and emailing to Inugent@cfnem.org (or postmarked by the first regular business day of July).
- Mail or deliver to: CFNEM, 100 N. Ripley, Suite F, P.O. Box 495, Alpena, MI 49707
- You may submit the complete, <u>signed</u> application by scanning and e-mailing it OR you may e-mail the application and then print and **mail** in the Cover Sheet of your application with appropriate signatures.