

FIGAWI CHARITIES, INCORPORATED

APPLICATION FOR A GRANT

APPLICANT _____

PROJECT TITLE _____

AMOUNT REQUESTED _____ DATE: _____

SUBMITTED BY:

NAME _____

TITLE _____ TELE. NO: _____

ADDRESS _____

Figawi Charities, Inc. will only consider a request for funding if the Human Service needs of the Greater Cape Cod Community (the Cape and Islands) is served.

All submitting organizations, groups or agencies must be designated not-for-profit, and must also be in good financial standing with local, state and federal tax authorities.

In order to succeed as a recipient of Figawi Charities, Inc. funds, it is imperative that a request for funding include a full descriptive of the goals/purpose of the organization, population served, listing and descriptive of board and staff members, a full budget delineating all sources of income and expense, as well as an explanation of how Figawi Funds will be used and their impact on the organization.

Figawi is particularly interested in supporting organizations that allocate less than 10% of their budget towards administrative expenses, and receive less than 25% of their funding from municipal, federal, or state resources.

Depending on the size of the requested donation and its impact on the organization's total budget, Figawi may invoke the right to produce and execute all activities and public relations deemed necessary and appropriate by Figawi Charities, Inc. in conjunction with the designated organization, agency or group.

Figawi reserves the right to forego the funding of any organization, agency or group that is considered controversial..

1. Full name of organization.
2. (a) Statement of what organization is chartered to do, with reference to authorizing agency and date of authorization. INCLUDE PHOTOCOPY OF ARTICLES OF ORGANIZATION.
- (b) Photocopy of TAX EXEMPTION STATUS LETTER, and a complete copy of the Internal Revenue Service DETERMINATION LETTER regarding your private foundation status.