



SCARF Grant Application

Date: _____

Check One: Community Recreation/Sports Community Arts

1. **Your Organization's Information** (Attach a page to expand on each question if needed. or attach any other supporting documents to assist in our decision.)

- a. Name of organization: _____
- b. Address: _____
- c. Contact person(s): _____ Telephone: _____
- d. Email: _____ Website: _____
- e. Description of your organization/group: _____

- f. Is your organization a 501c3? _____ or a Non-Profit _____? Other? _____ If other, please describe: _____

2. **Project Detail**

- a. Project name and description: _____
- b. How will this project help SCARF meet its goals and mission to benefit the Shelter Cove community(what issue are you trying to solve?) _____

- c. What are your qualifications/experience to manage this project? _____

3. **Financial Plan**

- a. Cost of proposed program: _____
- b. How will 50/50 match on grant funds be met? (Required) _____
- c. Will there be any income received from this project? Yes: _____ No: _____
If yes, explain who the recipient is (organization or an individual), how much income will be received and how it will be used: _____

4. **Plan Execution**

- a. Start/stop dates: _____
- b. Project location: _____

5. **Benefits**

- a. Benefits of this project to the community: _____

THE TWICE ANNUAL DEADLINES ANNOUNCED ON OUR WEBISTE WILL STILL BE STRICTLY ENCORCED.

To the best of my knowledge, the data and information in this grant application is true and correct, and I am authorized to file this grant application on behalf of the organization/group.

 Grant Applicant's Representative Signature Title Email Date

Please submit your application via email to sheltercoveartsrecreation@gmail.com