

The Junior League of Racine Special Aids Grant Application

All applications must be submitted by Wednesday, October 26, 2016

Attach a copy of your organization's US IRS issued 501(c)3 determination letter, which is confirmation that your organization is a charitable organization as defined by section 501(c)3 of the Internal Revenue Code. Without a copy of your organization's 501(c)3 determination letter accompanying the completed application, your request will not be considered. Public school applications are welcome.

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Mail completed application to:	
The Junior League of Racine, Community Resea PO Box 085744 Racine, WI 53408-5744	arch Committee – Special Aids Grant
Organization Name	
Applicant Name	Applicant Title
Address	
Phone – include best time of day to call	Email Address
Thone — include best time of day to call	Linaii Addiess
Grant amount that is being requested	

1. In the space below, summarize the purpose of your grant request:

2.	In the space below, explain how your grant request relates to The Junior League of Racine's mission and vision of "focused efforts on projects that enhance the well-being of children" in Racine County. Please be specific on where the money will be used and how it relates to children.
3.	Briefly describe your budget and please be specific on where the money will be used.
4.	Describe how your program relates to children of Racine County and describe the number of children impacted by this program.
Spe cor	e look forward to reviewing your application for consideration of rewarding a Junior League of Racine ecial Aids Grant to support your goals and the mission of the Junior League of Racine. Review your appleted application carefully, following the instructions and don't forget to include a copy of your IRS 1(c)3 determination letter.