

Brief Summary of Request (1-2 sentences)

prescottwifoundation@gmail.com or mail to PO Box 392, Prescott WI 54021

**Grant Application** Email completed application to:

an affiliate of the St. Croix Valley Foundation

Applications are reviewed on a rolling basis, generally at the start of each month. Submit applications at least 3 weeks prior to the start of the month for consideration. Allow a minimum of 60 days for approved grant funds to be delivered.

	Date Submitted				
APPLICANT INFORMATION					
Organization Name					
Address					
City	StateZip				
Website					
Submitted by	_Title				
Phone	Email				
EIN number					
Type of Organization  501(c)(3)  Government agency  Local unit of state or national organization  Type of Organization  Public school/educational agency  Group or club with charitable project					
GRANT REQUEST					
Grant Amount Requested \$					
	Recreation				
Start Date End Date					

ACKNOWLEDGEMENT: Applicant agrees to spend any awarded funds as described in this application and the award notification from the Prescott Foundation, and will allow the Foundation to verify use. Any grant funds that are not spent for the purposes of the grant must be returned to the Foundation.

## **BUDGET AND FUNDING SOURCES**

Please provide a summary of your budget for this project (insert below or attach a separate page). Identify other funding sources you have approached, the amount requested, and the status of your request.

## **DETAILED DESCRIPTION**

Please provide a detailed description of your request, including:

- Purpose of request

- Number of individuals to benefit

- How it meets a need in the Prescott area

- Resources for implementing

Note: If your description does not fit in the box below, please continue in the box on the following page.