

CorTrust Bank ALM (Artesian-Letcher-Mt. Vernon) Community Foundation Grant Application

Organization Name: _____

Contact Name: _____

Mailing Address: _____

Phone: _____

Email: _____

Is your organization a non-profit 501(c)3?

_____ If yes, non-profit or federal id#: _____

_____ If no and you are approved for a grant, you will be required to complete a grant acceptance policy form to receive your funds, and complete an evaluation form when your project is complete.

Grant amount requested: \$ _____

Total cost of the project: \$ _____

Description of specifically what these grant monies would be used for (attach copies of any supporting documents like estimates, quotes, invoices, etc.):

Description of the project and its benefit to the community:

List any other major donors or pledges to this project:

List the Board of Directors of your organization and/or major volunteers of this project:

Please provide any other information about your request/ project that you would like to include:

I acknowledge that all the information in this grant application is true and correct to the best of my knowledge. I also agree to comply with requests for any other information or reports that may be requested by the CorTrust Bank ALM Community Foundation.

Authorized Signature

Print Name

Date

Application deadlines fall twice a year, on February 15 and August 15, or the first business day following these dates if they fall on a weekend or holiday. Applications are usually reviewed by the CorTrust Bank ALM Community Foundation board members within six weeks following each deadline. Grant applicants will then be contacted with the review results.

This fully completed application should be printed and signed, then emailed with any attachments to bmetzinger@cortrustbank.com or mailed or delivered to one of the following locations prior to the deadline date:

CorTrust Bank
PO Box 188
Artesian SD 57314

CorTrust Bank
PO Box 188
Letcher SD 57359

CorTrust Bank
PO Box 5
Mt. Vernon SD 57366