



HCF Grant Application Form

Submitting Organization
Tax ID #

Instructions for Completing Grant Application Form

If your organization is an IRS verified organization and has a tax ID number, your organization will be able to receive a direct HCF grant distribution. If your organization is not an IRS verified organization, it can still be eligible for a HCF grant but will require additional documentation upon approval.

Email completed HCF Grant Application to hcf@huronsd.com. Applications may also be sent by US Mail to: HCF Grant, 1725 Dakota Avenue S, Huron, SD 57350. If submitted by mail, send only one copy of completed application. Applications must be received via email or regular mail **not later than March 15**.

Please use a large paper clip to hold pages together, rather than folders, covers, or staples. Applicants are encouraged to contact the Foundation with questions about any of the application requirements by email at: hcf@huronsd.com, or telephone 605-352-0000.

Identifying Information

Name of Organization Email

Address City State Zip

Contact Person Title Phone

What is the amount of grant monies requested from HCF

What is the total goal of your fund raising effort.....

Over what period of time

When is this project expected to be completed.....

Briefly describe your non-profit organization

Project Description

Please use the spaces provided on the application form whenever possible.

Description of the Project:

The need for the project and number of people impacted:

Describe the community support for the project:

Project Continuation Plans: Describe the expected results and the probability of continued support. Please indicate whether such support is projected from grants, donations, contracts or fees.

List names of agencies or organizations partnering with you on this project and summarize their role in the project.

Project Budget

Funds Requested from Huron Community Foundation.....	<input style="width: 280px; height: 20px;" type="text"/>
Grant Funds from other Agencies for this Project	<input style="width: 280px; height: 20px;" type="text"/>
Funds from your Organization.....	<input style="width: 280px; height: 20px;" type="text"/>
Other Sources of Funding..... <input style="width: 300px; height: 20px;" type="text"/>	<input style="width: 280px; height: 20px;" type="text"/>
Total Project Cost.....	<input style="width: 280px; height: 20px;" type="text"/>

Applicant's Most Recent Year-End Financial Resources

Total Balance of all Checking Accounts.....	<input style="width: 280px; height: 20px;" type="text"/>
Total Balance of all Savings Accounts and Certificates of Deposit.....	<input style="width: 280px; height: 20px;" type="text"/>
Total Balance of all Operating Reserve Accounts.....	<input style="width: 280px; height: 20px;" type="text"/>
Total Balance of all Endowments/Foundation Accounts	<input style="width: 280px; height: 20px;" type="text"/>

Provide a narrative of project budget information, including details of any matching funds or grants. The narrative must also indicate how the Huron Community Foundation funds will be spent and over what period of time.

Additional Information and Authorization

List Names & Titles of your Organization's . . .

Executive & Administrative Staff

Board of Directors

Names and qualifications of staff (existing or new) who will be responsible for this project.

I acknowledge that all the information in this grant application is true and correct to the best of my knowledge. I also certify that the funds applied for will benefit charity or a non-profit purpose. (Electronic Submissions – Type in Signature Information)

Authorized Signature

Date

Print Name

Title