



DIVISION GRANT APPLICATION

Name of Granting Division: _____

Amount of grant: _____

Name of Organization: _____

Address: _____

Phone: _____

Email: _____

Contact: _____

Federal Identification Number (FEIN): _____

Note 1: Attach evidence that the organization is tax exempt. If the organization is exempt under Section 501(c)(3) of the Internal Revenue Code, please attach a copy of the tax exempt determination letter issued by the Internal Revenue Service.

Note 2: Grant applications must be postmarked by April 1.

ORGANIZATION DESCRIPTION

(Please confine answers to the provided space)

Describe the purpose and goals of the applying organization.

State how this grant and this project/program will assist in meeting the organization's goals and objectives?

Provide any additional information that you think HSAC should know about either the organization and/or the project/program.

Should any of your anticipated cash income sources not meet your expectations, including this grant request, how will the shortage be made up, or will the project be abandoned? Note: If the grant funds are not used as proposed in this grant, the organization shall return the funds to HSAC.

PROJECT DESCRIPTION

Describe the specific project for which you are requesting funding. List the program(s) and breakdown of cost. Please list and prioritize all items within requested amount.

Details: (If schedule is complex please complete on separate page)

Beginning Date: _____
Ending Date: _____
Time(s): _____
Location: _____

Number of people involved in this project: _____

Number of individuals this project is designed to benefit: _____

Describe audience and/or participants who will be served by this project.
(Include demographic information such as age, special populations, income level, geographical area, etc.)

Will this project/program be open to the public? _____

How will you publicize this event? _____

How will you recognize HSAC? _____

Project Director Signature _____ Title _____

Please print and mail completed grant application to:

HSAC
P. O. Box 1542
Decatur, IL 62525-1542

Questions: call Macy Barnett (217) 422-8537

HSAC DIVISION GRANT POLICY

1. Grant application packets will be available at every division meeting.
2. Grant applications will be mailed to the HSAC secretary at P.O. Box 1542, Decatur, IL 62525, by April 1. Copies will be made to keep on file and then distributed to the appropriate division chair.
3. The division chair will then bring the applications to the following division meeting.
4. The division will then vote whether or not to award the applicant funds and recommend an amount.
5. The division chair will then take the application to the HSAC Executive Board for review and approval at the next board meeting.
6. If approved by the board, the HSAC treasurer will send payment to the award recipient as soon as practical.
7. If the grant funds are not used as proposed in this grant, the organization shall return the funds to HSAC.
8. Each division may award \$500.00 per year to appropriate agencies/organizations (less any projects funded).
9. Money not used during a fiscal year (will be given to the Professional Development Committee.) Alternate: (will stay in the general HSAC account.)
10. Within thirty days after the completion of the project/program, the grantee shall send to the HSAC secretary a summary of the activity that evaluates its results.