

FORT BEND CARES

2009 Grant Application

The following documentation is required along with the application:

- 1) A copy of the latest IRS Tax Exempt Determination Letter stating that your organization is not a private foundation and that it has Internal Revenue Code section 501(c)(3) status.
- 2) A statement on your organization's letterhead signed by the Executive Director that there has been no change in the organization's current IRS status.

I. Organization Information	
Legal Name of Organization:	
Employer Identification Number:	
Street Address, City and Zip:	
Mailing Address, City and Zip:	
Name of Primary Contact for Grant:	
Phone:	
Fax:	
Email:	
Website:	
Year Organization Established:	
Your Organizations Mission:	
Give a brief overall description of your organization:	
Describe any ongoing collaboration with other agencies and/or organizations.	

II. Grant Proposal Information	
Total Project/Program Cost:	\$
Amount Requested from FORT BEND CARES:	\$
Time frame for use of grant funds:	
Purpose of grant:	
Summary of project/program:	
What age groups of children and/or youth will benefit from the project/program?	

Describe how the program/project provides a long term benefit to Fort Bend County:
Will Fort Bend County residents be the direct recipients of the project/program?
What consequences to the project/program are anticipated if Fort Bend Cares can only partially meet your grant request?
What portion of the grant will go to administrative costs?
Will the grant funds be used to establish or fund an endowment?
Describe how your organization benefits from churches, an endowment, a major fundraiser, corporate donors, benefit from a private foundation or United Way funding?

III. Board Chairman and Executive Director Information	
Name of Board Chairman:	
Business Affiliation:	
Position Held:	
Mailing Address, City and Zip:	
Phone:	
Fax:	
Email:	
Name of Executive Director:	
Phone:	
Fax:	
Email:	
Names of other Board members:	

_____ (Signature of Board President)

_____ (Signature of Executive Director)

_____ (Date Signed)

IV. The following may be requested by the Fort Bend Grant committee reviewing your application. A request from Fort Bend Cares will be made if required.

A copy of your organization's most current annual operating budget.

A line item budget for the proposed project that includes all funds allocated to the project, a to-date list of funds and/or pledges secured as support. Also include a list of all outstanding requests made to additional funding sources. Sources of committed and pending funds should include the names of funders and the amounts awarded, pledged or requested. (See Budget Format)

A copy of your organizations most recent audited financial statement. If your organization's financial statements are not audited, reviewed or compiled by an independent accountant, the organization should submit internally prepared financial statements, including a statement of financial position (a balance sheet) and a statement of revenues and expenses, marked un-audited.

A copy of the latest IRS Form 990 (including all supporting schedules and Schedule A).

Please submit the completed application and required supporting documents to:

**Fort Bend Cares
c/o Grant Committee
14823 Southwest Freeway
Sugar Land, Texas 77478**