

Mary Chilton DAR Foundation Grant Application

(For Foundation Use Only)

Date Received:

Application #:

Disposition:

Mailing Address:

Mary Chilton DAR Foundation
P. O. Box 90716
Sioux Falls, SD 57109-0716

Please refer to the grant application
instructions before proceeding.

PART 1 GENERAL INFORMATION

1. APPLICANT

Organization: _____

Address: _____

2. NAME AND TITLE TO WHOM CORRESPONDENCE SHOULD BE ADDRESSED

Name: _____

Title: _____ Telephone: (____) _____

3. TITLE OF PROJECT

4. BRIEF OVERVIEW OF PROPOSED PROJECT (Do not exceed space provided.)

4(a) Project Description _____

4(b) Total Project Cost _____ Amount Requested from DAR _____

4(c) Project Timeframe: Start _____ End _____

5. TYPE OF APPLICANT (Check One)

Non-Profit Organization
(Please Attach IRS 501(c)(3) Exemption Letter)

Governmental Entity

School District

Individual

Other (describe): _____

6. DESCRIPTION OF ORGANIZATION (for nongovernmental entities)

On a separate sheet(s), please provide information about your organization. Include approximate age of the organization, number of members, amount of dues or membership costs, and a financial summary (balance sheet, approximate annual budget identifying revenues by source).

7. TYPE OF APPLICATION (Check One)

New

Renewal

Revision/Resubmittal

Supplement

8. LOCATION WHERE PROJECT WILL BE COMPLETED

9. WILL THIS PROJECT REQUIRE ADDITIONAL FUNDING FOR CONTINUATION OR MAINTENANCE?
IF SO, DESCRIBE HOW THESE COSTS ARE TO BE FUNDED.

10. WHAT PROCEDURE WILL BE USED TO IDENTIFY THE MARY CHILTON DAR FOUNDATION AS A SOURCE
OF FUNDS FOR THIS PROJECT?

PART II BACKGROUND AND SIGNIFICANCE

DESCRIBE THE BACKGROUND AND SIGNIFICANCE OF THE PROJECT, AND EXPLAIN HOW THIS PROJECT RELATES TO THE MARY CHILTON DAR FOUNDATION GOALS OF PATRIOTISM, HISTORY, HISTORIC PRESERVATION AND/OR UNIQUE EDUCATIONAL OPPORTUNITIES. BRIEFLY STATE THE GOALS FOR YOUR PROJECT, AND DESCRIBE HOW THE COMPLETED PROJECT WILL BE EVALUATED. IDENTIFY WHO AND HOW MANY PEOPLE WILL BENEFIT FROM THE PROJECT. PLEASE BE SPECIFIC (Please attach the information).

PART III PLAN OF WORK

DESCRIBE THE PLAN OF WORK FOR THE PROJECT, INCLUDING RELEVANT DATES OF COMPLETION OF EACH STAGE OF WORK. WHAT ARE THE DATES AND AMOUNTS WHEN FUNDS WILL BE NEEDED? (Please attach the information).

PART IV BUDGET

PROVIDE A BUDGET BREAKDOWN OF ALL ESTIMATED PROJECT COSTS. (Please attach the information).

PART V PROJECT ALTERNATIVES

1. IF THE MARY CHILTON DAR FOUNDATION IS UNABLE TO FUND THE ENTIRE PROPOSED PROJECT, DO YOU DESIRE THAT FUNDING FOR A PORTION OF THE PROJECT BE CONSIDERED?

Yes _____ No _____

2. IF SO, PLEASE DESCRIBE IN DETAIL THE PORTION OF THE PROJECT YOU WISH THE FOUNDATION TO CONSIDER, THE AMOUNT OF FUNDING NEEDED, AND HOW THE BALANCE OF THE PROJECT WILL BE COMPLETED (Please attach the information).

3. HAVE YOU SUBMITTED, OR DO YOU PLAN TO SUBMIT AN APPLICATION TO ANY OTHER FUNDING SOURCE (PUBLIC OR PRIVATE) FOR FINANCIAL SUPPORT FOR THIS PROJECT? IF SO, PROVIDE DETAILS. (Please attach the information).

PART VI ADDITIONAL INFORMATION

NUMBER ITEMS OF ADDITIONAL INFORMATION, IF ANY, SUBMITTED WITH THIS APPLICATION. (Please attach information.)

PART VII SIGNATURE

CERTIFICATION: I certify that the statements contained in this application are, to the best of my knowledge and belief, true, correct and complete.

AUTHORIZING OFFICIAL

Signature: _____ Date: _____

Name: _____ Title: _____

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MARY CHILTON DAR FOUNDATION * INSTRUCTIONS FOR SUBMITTING
P. O. BOX 90716 * GRANT APPLICATIONS
SIOUX FALLS, SD 57109-0176 *

1. Use the application form for all grant requests that exceed \$500.00.
2. The form should be typewritten. If the application is not typewritten, please print clearly using **black ink**. The application form and all copies must be legible in order to be considered.
3. If the space provided on the application is not sufficient, please attach additional sheets. The additional sheets should follow Part VI and should clearly identify the application item to which they relate.
4. All pages and additional materials must be on 8 ½ x 11 inch paper.
5. All attachments, photographs, brochures, exhibits and other materials (including letters of support or recommendation) must be stapled to the application. Do not use paper clips or other fasteners.
6. Do not put applications inside covers, binders, folders, or notebooks of any type.
7. An application package consists of a completed application form with original signature(s) and additional materials and six (6) photocopies of your completed application including any additional materials for a total of seven (7).
8. Be sure to keep a copy of your completed application for your records.
9. Materials submitted cannot be returned. Limit the application to items specifically requested.
10. Enclose all requested items in a single package. Mail the package to:

Mary Chilton DAR Foundation
P.O. Box 90716
Sioux Falls, South Dakota 57109-0716
11. Failure to observe these guidelines may result in your application being returned without consideration.
12. If you have any questions about the application or concerning special or unusual circumstances, please feel free to contact the Foundation at (605) 594-8213 and leave a message.

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MARY CHILTON DAR FOUNDATION * GRANT APPLICATION
P. O. BOX 90716 * INSTRUCTIONS
SIOUX FALLS, SD 57109-0176 *
*

PART I, ITEM 1

Give the name of the organization submitting the application. Be sure to use the correct legal name of the organization; grant disbursements will be made payable to the named organization and sent to the address provided here, unless otherwise instructed. If the applicant is an individual, provide the individual's name.

PART I, ITEM 2

Please provide the name, title and phone number of the specific person to whom questions concerning the application or project should be directed. Notice of the action upon your grant application will be sent to this individual.

PART I, ITEM 3

Give the name of your project.

PART I, ITEM 4

- 4(a) Give a brief description of the proposed project in the space provided. A more complete description of the project will be covered in Parts II, III and IV.
- 4(b) Estimate the total project cost, and clearly indicate the amount of grant funds requested from the DAR Foundation.
- 4(c) List the starting and ending dates for the project or the dates during which the project will be completed as described in Part III. The Foundation reserves the right to discontinue funding for projects not completed by the ending date. If unforeseen circumstances arise after the start of the project which will delay the completion date, an extension may be requested.

PART I, ITEM 5

Check the description that most clearly identifies the type of applicant. If the description checked is "other," please give a brief explanation. Non-profit organizations must provide a copy of their IRS 501 (c)(3) exemption letter.

PART I, ITEM 6

On a separate sheet(s) of paper, please provide information about your organization. Tell us: when it was established; whether it is a membership organization and, if so, the number of members and amount of annual dues assessed per member. In addition, attach a copy of your organization's annual budget and a copy of its most recent balance sheet.

PART I, ITEM 7

Check the type of application being submitted. If this application is a revision, a renewal or a supplement to a prior application, please give the date of the prior application.

PART I, ITEM 8

Please identify where the project will be located, completed or used. Do not identify the location where the project will be constructed if it will be moved later to a different site. If the project involves repairs or improvements to physical objects or facilities, you must provide recent photographs of the same.

PART I, ITEM 9

If the project will require future funding for continuation or maintenance, please describe how the future costs will be met.

PART I, ITEM 10

Tell how you plan to publicly recognize the support provided by the Mary Chilton DAR Foundation for this project. Such recognition may be in the form of a program listing, public announcement, or permanent plaque or other designation attached to the project, whichever is most appropriate.

PART II

Foundation grants are restricted to projects that support the Foundation's goals. Use this opportunity to establish a firm link between your project and one or more of the Foundation's goals.

Please state the goals for your project and describe the persons who will benefit from the project. Also include a description of the method by which the project can be evaluated after it has been completed.

PART III

Please describe the plan of work or other stages of completion of the project. If appropriate, give dates by which the various stages of the project will be completed. If the application to the Foundation is for funding of a portion of the entire project, indicate when the entire project can expect to be completed. Such completion date may be unknown, such as "when additional funds become available." Also please indicate the date or dates upon which funds from the Foundation are needed.

If the applicant is an individual or an organization other than a non-profit organization that has a letter of exemption under Section 501(c)(3) of the Internal Revenue Code, the response to Part III must indicate how distribution of charitable funds will be managed. This distribution method and must include a process by which the Foundation can assure that the grant funds were used for the purposes described in this application.

PART IV

Please provide a budget showing projected income and expense for the entire project. Indicate the items the Foundation's grant will pay for and those that will be covered by income from another resource(s). Other income might include revenue in the form of grant support from other funding sources; "in-kind" contributions such as labor, printing, transportation, etc.; or revenue from sales, admission, rents, etc. Expenses should be listed in detail and might include such items as salaries, wages, equipment, travel, supplies, fees, contractor's costs, and the like.

PART V, ITEM 1

Check "Yes" or "No" to indicate your preference for partial funding.

PART V, ITEM 2

Refer to the budget breakdown in Part IV. Tell which of these items you consider funding priorities. Describe how you plan to obtain funding to cover the additional items.

PART V, ITEM 3

If you are applying to other sources for funding this project, please list those sources here. For each source, provide the dollar amount of assistance requested and describe how that assistance will be used.

PART VI

Include such additional information as you feel is necessary for the Foundation to evaluate your application. Number the items of additional information provided. Materials submitted with the application cannot be returned. All materials must be on 8½ x 11 paper. Odd size materials such as pamphlets, brochures, diagrams, etc. will not be considered as part of the application. Do not submit non-printed items (cassette tapes, objects, etc.).

Part VII

Sign the application and provide the requested information.