



WOMEN'S GIVING CIRCLE

Application For Grant

Application
DUE DATE 2025:
September 1

Date: _____

NAME OF WOMEN'S GIVING CIRCLE APPLYING TO:
(Rensselaer or DeMotte): _____

LEGAL NAME OF AGENCY Requesting Funds: _____

Federal Tax ID# or EIN# _____

Address: _____

City: _____ Zip Code: _____

Contact Person _____

Phone: _____ E-mail: _____

Amount Requested: _____ Pertinent Dates Involved: _____

PROGRAM DESCRIPTION (of the (Give ONE BRIEF CONCISE SENTENCE)):

Submit the following:

1. A list of the Officers and Board of Directors.
2. A copy of the organization's Federal 501 (c) 3 Tax Exemption letter from the Internal Revenue Service.
3. A one-page narrative on why this proposal is important to your organization and the community. Funding is very competitive, and often, a fully funded request cannot be granted. Please discuss alternative sources of funding in your narrative.

Please submit applications to:
Jasper Newton Foundation, Inc.
P.O. Box 295
Rensselaer, IN 47978
219-866-5899

FOR OFFICE USE ONLY

Date Received: _____ Date Approved: _____

Category: _____ Date Denied: _____

Amount Granted: _____

Special Grant Conditions: _____