

MOR-GRAN-SOU ELECTRIC COOPERATIVE INC.
GRANT APPLICATION

Application # _____ (Internal use only)
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Instructions:

Applicants are requested to submit application form based on the following:

For requests	\$0 - \$1,000	Complete Parts I and II.
	\$1,000 - \$5,000	Complete Parts I, II, III.
	Over \$5,000	Complete Parts I, II, III and IV.

Please type or print in black ink. Attachments may be necessary due to space limitations. Attachments should be paper clipped to the application forms or attached to the email. **Sign all pages submitted.**

Please save this page to your computer. Complete all fields and save. Reopen the document to doublecheck that any changes have been saved. Then, either:

- Email to Mor-Gran-Sou Electric Cooperative at info@morgransou.com or
- Mail to Mor-Gran-Sou Electric Cooperative, Inc., PO Box 297, Flasher, ND 58535-0297.

Part I: Organization Information

Name of Organization: _____

Address: _____
(Street) (City) (State) (Zip)

Contact: _____
(Name/Title) (Phone) (Fax) (E-mail)

Has organization received notice from the Internal Revenue Service of a tax-exempt or determination under Section 501 (c)(3) of the Internal Revenue Code?

_____ Yes – If yes, please supply a copy of such ruling with this application form
_____ No – If no, please explain _____

Federal Tax Identification Number: _____

Describe your organization and its purpose:

Have you had any pending or recent lawsuits challenging the propriety of your disbursements and /or actions of your staff, volunteers or board members?
_____ Yes _____ No

Have you had any pending or recent publicity viewed as adverse or critical?
_____ Yes _____ No

If you answered “Yes” to either of the previous two questions, please furnish a summary of the circumstances:

I acknowledge that all the information in this grant application is true to the best of my knowledge. I certify that the funds applied for will benefit charity or a non-profit purpose.

Part II: The Project

What is the amount of grant monies requested: \$ _____

What is the estimated completion date of the project: _____

Describe the project:

Describe the need for the project:

Describe the geographic area the project will serve:

Describe the community support for the project:

Part II: The Project (continued)

Describe how the project contributes to the mission of the organization:

Why should Mor-Gran-Sou Electric Cooperative Inc. support this project:

Describe the expected results from this project:

I acknowledge that all the information in this grant application is true to the best of my knowledge. I certify that the funds applied for will benefit charity or a non-profit purpose.

Authorized Signature: _____

Date: _____

Title: _____

Part III: Budget

Total fund drive amount: \$ _____ Amount secured to date: \$ _____

Over what time period is the funding being sought? _____

List major corporate commitments and amounts received for this project:

List other funding sources and amounts pledged or received for this project:

Does this project involve affiliation/collaboration with other agencies/organizations?

_____ Yes _____ No

If yes, list names of those agencies/organizations and attach any letters of agreement or support that may be appropriate:

Part III: Budget (continued)

Fiscal Period: _____ to: _____
 (Month) (Year) (Month) (Year)

Project Costs:	Total	Funds you are committing to the project
Administrative: (Includes salaries, benefits, other personnel expenses)	\$	\$
Operational: (Supplies, equipment, daily expense items)	\$	\$
Promotional: (Fund raising, advertising, marketing expenses)	\$	\$
Other Costs: (Please explain below)	\$	\$
TOTALS:	\$	\$

Explanation of other costs (if applicable):

I acknowledge that all the information in this grant application is true to the best of my knowledge. I certify that the funds applied for will benefit charity or a non-profit purpose.

Authorized Signature: _____

Date: _____

Title: _____

Part IV: Project Evaluation

Who will be responsible for the project evaluation? _____

Please detail the procedures by which the project will be evaluated:

I acknowledge that all the information in this grant application is true to the best of my knowledge. I certify that the funds applied for will benefit charity or a non-profit purpose.

Authorized Signature: _____ Date: _____

Title: _____

For Mor-Gran-Sou Electric Cooperative Inc. Only:

Request for funding reviewed on: _____

Amount Contributed: _____ (Signature)

Request Denied: _____