

**SWINGING WITH PURPOSE GRANT APPLICATION**

**ORGANIZATION CONTACT INFORMATION**

Name:

Address:

Phone:

Tax ID:

CEO/Executive Director:

Contact person:

Phone:

Email:

**GRANT INFORMATION**

Request amount:

Category – What is this?

Have you received previous funds from SWP?

If Yes, most recent funded amount: Date Funded:

ORGANIZATION’S TOP THREE (3) PRIORITIES FOR THE NEXT TWELVE (12) MONTHS/FUNDING REQUIREMENTS FOR EACH:

**PROGRAM INFORMATION**

How does your agency help SWP meet our mission?

Program title:

Program start date:

Program end date:

Program description:

Total program budget:

What percentage of the total agency budget does this program represent?

Program Public funding sources and amounts (Federal, State, Municipal):

Does the organization receive monies from the NCEF (Wine Festival)? If so, what is the grant amount?

What other private funding sources are being received?

What percent of the program budget is publicly funded?

How will this grant have an impact on the services your program seeks to provide?

Program number served last year:

Program number you expect to serve this year:

Were there any significant changes within your program over the past year?

Does your organization include any golf venue(s)/tournaments in your fundraising initiatives? If yes, please provide details of the venue and the approximate net revenues to the organization?

What are some of the specific statistics or measurement guidelines that you use to

track the success of your agency and what are your prior 12 months results?

What percent of the program budget would our grant represent if we met your full request?

**POST GRANT EVALUATION**

Final SWP grant amount awarded in the previous fiscal year:

Please list the program funding sources and amounts for grants awarded in the previous fiscal year.

Was any portion of the grant utilized for any purpose other than that for which it was awarded?

Were the goals met?

What percent of the General Operating and/or program Budget did the grant represent?

**ORGANIZATION INFORMATION**

Agency Tax ID:

Fiscal year cycle:

Board of Directors:

Year founded:

Number of employees (full-time and part-time):

How often does the Board meet?

Is the Board provided current financial documents during these meetings?

Agency number served last year:

Total agency budget:

Agency public funding amounts:

Agency total amount of private funding:

Mission:

History:

Services: