



# River Fund, Inc. PROGRAM GRANT APPLICATION

## CONTACT INFORMATION

\_\_\_\_\_  
Name Contact Title

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Mailing Address (if different from above)

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Phone Cell Phone Email Address

## ORGANIZATION PROFILE

\_\_\_\_\_  
Official Name

\_\_\_\_\_  
Legal Name Tax I.D. (E.I.N.)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Telephone Fax Email Address

Organization Mission Statement:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REQUEST HISTORY**

Previous Funding? \_\_\_\_ Yes \_\_\_\_ No Previous Funding Date: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Previous Funding Description: \_\_\_\_\_

---

---

---

---

---

**PROGRAM INFORMATION**

Program Focus Area: \_\_\_\_\_

Fund Use: \_\_\_\_\_

---

---

---

---

---

---

---

---

---

---

Unmet Need and/or Problem Area: \_\_\_\_\_

---

---

---

---

---

---

---

---

---

---

Program Description: \_\_\_\_\_

---

---

Program Description (Cont'd.)

---

---

---

---

---

Primary Target Population: \_\_\_\_\_

---

---

---

---

Desired Results: \_\_\_\_\_

---

---

---

---

---

Organizational Total Annual Budget for Current Year: \$ \_\_\_\_\_

Program Budget for this Request: \$ \_\_\_\_\_

Requested Grant Amount: \$ \_\_\_\_\_

**PROGRAM BUDGET BREAKDOWN**

Program Budget Items (Item Description and Amount):

---

---

---

---

---

---

---

---

---

---

Program Budget Items (Cont'd.)

---

---

---

---

---

---

---

---

**DONOR RECOGNITION** – Should River Fund, Inc. select your organization for grant funding this year, describe the plan for recognizing River Fund (i.e., TV, radio, news media, websites, etc.) as the funding agency.

---

---

---

---

---

---

---

---

**ADDITIONAL INFORMATION**

Other Potential Funders (List other organizations or sources for funding this program) \_\_\_\_\_

---

---

---

---

---

---

**ADDITIONAL DOCUMENTATION:** The River Fund, Inc. Board of Directors requires additional documents to complete the determination process. All information and documentation will be handled in a confidential manner. The documentation must be retained as part of a permanent file and therefore cannot be returned. See page 5 for details.

Additional Documentation (Cont'd.)

The additional documents listed below are not counted as part of the questionnaire. Financial information must accompany all requests regardless of the dollar amount of the request. **IF FUNDED IN THE PAST, DO NOT DUPLICATE DOCUMENTATION THAT HAS NOT CHANGED IN THE PAST TWO (2) YEARS.** Please check the boxes indicating the documents attached. Please attach one legible copy of each of the following:

- Current IRS determination letter (or that of your fiscal agent) indicating 501(c)(3) status
- Most recent 990 tax return
- Organization's current year operating budget
- Organizations most recent financial statement, reviewed, if not audited
- List of Board members, their professions and places of employment
- Biographies of key staff relevant to this funding request
- Organization Articles of Incorporation
- Organization By Laws
- Any letters of commitment and/or support from participating organizations (if applicable)

\_\_\_\_\_  
Authorized Signature (Person Completing Application)

\_\_\_/\_\_\_/\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature (Board of Directors Chairman/President)

\_\_\_/\_\_\_/\_\_\_  
Date

\_\_\_\_\_  
Print Name

## APPLICATION INSTRUCTIONS

### I.

- Application Questionnaire must include all required information and documentation to be considered;
- Questionnaire must be legible, printed or type written. If additional pages are required, use 8½" X 11" white paper;
- Insert page numbers;
- Sign and Date the Application where indicated;
- **Submit SIX (6) COPIES of Application and Questionnaire and ONE (1) COPY of each of the required attachments; NO STAPLES – PAPER CLIPS ONLY!**
- By deadline, mail the original application, questionnaire, the six additional copies and any up to date documentation as requested in a sealed envelope to **River Fund, Inc., 55 Civic Way, Laughlin, NV 89029**. As an option, the completed package may be hand delivered to either River Fund office at:

55 Civic Way, Laughlin, Nevada or 1343 Hancock Road, Bullhead City, Arizona

## APPLICATION QUESTIONNAIRE

### A. **Organizational Profile:**

- Mission Statement – Cite the adopted Mission Statement of the organization –or- Tell us your stated goals, objectives and your mission as a non-profit organization.

### B. **Request History**

- Previous Funding Description – If you have received grants from River Fund in the past, please list the dates, amounts and for what purpose.

### C. **Program Information**

- Program Focus Area – Describe what the purpose of the request is and what you want to accomplish as a result of your activities. Include the short term and long-term changes you are working toward and how this grant request will achieve those changes.
- Fund Use – A brief description on how you intend to spend the funds (repair equipment, purchase supplies or products, furniture or other equipment, warehouse equipment, insurance, etc.).
- Unmet Need and/or Problem Area - Describe the community needs or problems and how this funding will address the situation.
- Program Description – Summarize the work plan that will be used to accomplish this request. Include details on equipment needs, statistics on increases/decreases in persons served, and other pertinent information that will provide sufficient information for the Grant Committee to make appropriate decisions.
- Primary Target Population – Who are you serving? Veterans? Seniors? Children? Adults? Is this a service that is not measureable in terms of lives? How else would you measure the results of the funding?
- Desired Results – What do you expect to achieve as a result of being funded?

### D. **Program Budget Breakdown**

- Program Budget Items – Simply list the quantity (if appropriate), item description and cost of each requested item
- For equipment or repairs, provide a minimum of two (2) estimates on vendor provided forms and for what length of time the estimates are valid.
- Budget details are to be submitted as a separate document in generally accepted accounting format.