

## **Grant Application Guideline**

Operation Round Up® provides funding assistance to approved eligible applicants located within the counties of: Dubois, Crawford, Orange, Martin, Perry & Pike Counties served by Dubois REC.

### **Grant Cycles**

Call the office to verify due date or check the website.

### **Categories of Assistance**

1. Community Service
  - Programs, projects and organizations that are important components of a community's overall quality of life, with emphasis on public safety, health care, self-sufficiency, and basic human needs.
    - Victim (abuse and crime) assistance programs
    - Emergency rescue health care equipment and transportation services
    - Local fire departments, rescue squads, law enforcement groups
    - Local libraries
  - Programs and projects that enhance the cultural environment of communities in our local area
2. Education and Youth
  - School and academic enrichment programs
  - Programs and projects designed to combat critical social problems affecting our youth, with an emphasis on children and teens at risk.
  - Programs and projects that promote youth wellness.
  - No college scholarships will be awarded.
3. Environment
  - Programs that promote community recycling and natural resource preservation.
  - Community-based environmental quality education programs.

### **Applicant Eligibility**

1. Contributions will generally be made only to not-for-profit organizations, governmental entities, school districts or colleges that have been granted tax-exempt status by the Internal Revenue Service 501(c) (3).
2. The organization must contribute to the community's health and/or welfare.
3. The organization's services must be non-discriminatory in nature.
4. Individuals/families must reside in Dubois REC territory.
5. Awards for an individual/family must be awarded thru a 501(c) (3) organization. No individual, group, organization, charity, or organization shall receive money from the Fund for the same purpose for more than two consecutive years. At least one full calendar year shall pass from the date of the second disbursement to the time of the next application.

### **Evaluation Factors**

The following factors will be considered in the evaluation of all funding requests:

- Potential benefit to residents of the Dubois REC Service Area and the entire community.
- Level of community support for the program or project or the organization requesting the funds.
- Fiscal and administrative capability of the organization to deliver a quality service or program.
- Results that are predictable and can be evaluated.

### **Completing the Application\*\*\*All Steps must be submitted or will not be considered**

- ✓ Complete all the pages of this application form. The Application must be **typed or printed**.
- ✓ Be sure to sign the application.
- ✓ A copy of the most recent fiscal year's financial statement must be attached. If the organization has an independent audit, a copy of that report should be attached.
- ✓ A copy of the organization's 501 (c) (3) status from the IRS must be included.
- ✓ A one-page budget outlining the project of this request must be attached.
- ✓ A copy of the requesting organization's current fiscal budget should be attached.
- ✓ If you are requesting specific items, please attach a written quote from a vendor with a line-item breakdown for each item. Pictures and/or specifications of the items are greatly appreciated when attached.

Deliver **9 nine** completed copies of the application and the necessary attachments to  
Dubois REC Community Fund  
c/o Dubois REC

PO Box 610, 1400 Energy Drive, Jasper, IN 47547 Questions

may be directed to Elizabeth Kempf at 812.482.5454

Additional information is available on our website, [www.duboisrec.com](http://www.duboisrec.com).



**ORGANIZATIONAL GRANT APPLICATION**

TYPE OR PRINT ALL INFORMATION

Name of Organization: \_\_\_\_\_

Grant amount requested: \_\_\_\_\_ Date Established: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Daytime Telephone: \_\_\_\_\_

Contact Person: \_\_\_\_\_

General objectives of the organization: \_\_\_\_\_

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

Briefly describe the project or program for which funding is being requested

(Attach additional page if necessary): \_\_\_\_\_

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

Other funding sources applied for this project:

Source:

Amount:

_____	_____
_____	_____
_____	_____

Sources of firm pledges and commitments to-date:

Source:

Amount:

_____	_____
_____	_____
_____	_____

Is this a new organization?

\_\_\_ Yes \_\_\_ No

Is this a new program within an established organization?

\_\_\_ Yes \_\_\_ No

Is this grant to supplement an established program?

\_\_\_ Yes \_\_\_ No

Does your organization have tax-exempt status under the section 501(c)(3)  
of the IRS Code?

\_\_\_ Yes \_\_\_ No

Financial Record of the Organization (attach additional pages if necessary):

Source of funds in previous years: \_\_\_\_\_

\_\_\_\_\_

Expenditures - current year (itemize briefly):

Amount

_____	_____
_____	_____
_____	_____
_____	_____



Date the funds from this grant, if awarded, would be needed:

Date: \_\_\_\_\_ Amount: \_\_\_\_\_

Date: \_\_\_\_\_ Amount: \_\_\_\_\_

If this will be a continuing project, explain in detail the source of funds for operation in subsequent years: \_\_\_\_\_

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

List your board of directors and/or trustees and officers along with their telephone numbers:

\_\_\_\_\_  
Name Phone Name Phone

Please list two (2) references (may not be a Dubois REC director or employee or a trustee of Dubois REC Community Fund, Inc.)

1. \_\_\_\_\_

Name Phone

\_\_\_\_\_  
Address City State Zip

2. \_\_\_\_\_

Name Phone

\_\_\_\_\_  
Address City State Zip

List any other pertinent information, which would aid in the evaluation of your grant request:

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For this application to be given consideration by the Dubois REC Community Fund, Inc. it must be signed by the organization's President and by the individual to whom future questions and correspondence may be addressed:

_____ President / Chairperson	_____ Contact Person
_____ Printed Name	_____ Printed Name
_____ Date Signed	_____ Date Signed

**The following information MUST accompany this application or will not be considered**

- \* A one-page budget for the amount requested, with justifications
- \* A copy of the IRS letter confirming 501 (c)(3) status (if applicable)
- \* A copy of the most recent audited financial statements or annual report
  - \* Current organizational budget (if not available please explain)

Mail or deliver **9 copies** of this application and support materials to:

Dubois REC Community Fund, Inc.  
c/o Dubois REC  
P.O. Box 610  
1400 Energy Drive  
Jasper, IN 47547

(812).482.5454

# Checklist

**The following information MUST accompany this application or will not be considered**

- A one-page budget for the amount requested, with justifications
- A copy of the IRS letter confirming 501 (c)(3) status (if applicable)
- A copy of the most recent audited financial statements or annual report
- Current organizational budget (if not available please explain)