

The mission of the Winter Park Foundation, Inc. is to support and provide resources to individuals, families and children in our community and to ensure the continuation of cultural, educational, health and human resource opportunities for our residents. We accomplish this through the funding of annual grants to local charitable and nonprofit organizations which strengthen our Winter Park community and improve our overall quality of life.

CRITERIA FOR GRANT APPLICATIONS

1.Organization must meet IRS requirements for "Not For Profit" status and furnish proof of 501(c)(3) status, such as an IRS letter stating same.

2. Applications must be received no later than May 1st, stating the amount requested (Grants awarded by August 1st). Our typical grants range from \$2,000 to \$3,000.

3. Description must detail how the funds will be used for the direct benefit of Winter Park residents. Applications must include the statistics/examples of past service to the Winter Park community and its residents. Preference will be given to charitable organizations based in and serving Winter Park and those who demonstrate financial need and beneficial purpose.

4. The completed application should be submitted electronically by attaching it to an email and sending it to: <u>WinterParkFoundation@gmail.com</u> You can also send the form via US Postal Mail: Winter Park Foundation, P. O. Box1416, Winter Park, FL 32790. (You might want to do both to eliminate any possibility of electronic glitch.)

5. The submission should include:

- a. Brief description of the organization and its activities including its MissionStatement.
- b. Explanation of how the funds will be **used for the direct benefit of Winter Park residents.**
- c. Explanation of past service to the Winter Park community and its residents.
- d. List of the Governing Board, with their affiliations.
- e. Most recent auditedfinancial statements & IRS Form 990.
- f. Copy of current year budget.

g. Copy of the most recent determination letter from the IRS granting exemption from federal income tax.

h. A brief summary (two or three sentence maximum) of how the funds will be used.

6. Identify any Winter Park Rotarian(s) who are actively involved in your charitable organization. **Note:** Preference will be given to those organizations in which one or more Winter Park Rotarians are actively involved.



GRANT APPLICATION

ORGANIZATION:		
STREET:		
CITY, STATE, ZIP:		
TELEPHONE:	MOBILE:	
E-MAIL:		
EXEC. DIRECTOR'S	NAME & TITLE:	
CONTACT PERSON (IF OTHER THAN EXECUTIVE DIR.)		
Mission of the Organization:		
If your grant request is approved by the Winter Park Foundation, may we use information and photographs you provide us about your organization and how the grant was used on our Web site or other social media? Yes No		
BRIEF DESCRIPTION OF REQUEST IS SET FORTH BELOW		
SIGNATURE, PRESI	DENT - BOARD OF DIRECTORS	DATE
SIGNATURE, EXEC		DATE
Winter Park Foundation, Inc. P.O. Box 1416, Winter Park, FL 32790		

WinterParkFoundation@gmail.com



Brief DESCRIPTION OF REQUEST (attach additional SHEET IF NECESSARY)