Revised 4/15/2024

**The Canal Society of Ohio, Inc**.

317 Fallow Court, Piqua, OH 45356

[www.canalsocietyohio.org](http://www.canalsocietyohio.org)

GRANT APPLICATION FORM

Submission Deadline: Last Day of September

(See Instructions Page and Checklist Before Completing Application)

Name of Organization:

Street address:

City/State/Zip:

Contact person:

Daytime Phone: Email:

Internal Revenue Service Status 501(c)(3) or equivalent? Yes No \_\_\_\_\_\_\_\_\_\_\_\_\_

Federal ID# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Describe the Organization’s objective and history (briefly stated including major activities and length of time in business).**

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|  |

**Briefly state the purpose of this grant (attach a separate page if further explanation is needed)**

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|  |

Area(s) of Ohio served by project: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of Ohio residents affected by project: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount requested: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Round to nearest dollar)

Total project budget: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other resources contacted for support of this project\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount(s) Requested: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization’s history with The Canal Society of Ohio, Inc:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First Grant Request? Yes \_\_\_\_\_\_\_ No \_\_\_\_\_\_\_ Date of Last Request: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Last Grant Awarded: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**THE FOLLOWING SIGNATURES ARE REQUIRED:**

I certify the information is accurate to the best of my knowledge and that completed copies of this Application along with the documents listed below have been included.

**CEO / Director:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**President / Chair:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**ITEMS TO INCLUDE WITH APPLICATION**

* Grant Application Form
* Basic Budget Statement for the proposed project or purchase
* Most Recent Financial Statement
* Organization’s Annual Report or equivalent
* List of Governing Board Members
* **Submit One (1) Copy** of the organization’s Letter of Determination from the Internal Revenue Service certifying 501(c)(3) status or equivalent.

# APPLICATION CHECKLIST

Complete the Grant Application in its entirety and submit prior to the deadline. Incomplete Applications (missing information or supporting documents) will **not** be considered.

Before submitting the Application use the following checklist:

* All required signatures are on the application
* Dollar amounts for the requested grant and total project cost are included
* Application **must** include:
* Completed Grant Application Form
* Basic Budget Statement for the proposed project or purchase
* Most Recent Financial Statement
* Organization’s annual report or equivalent
* List of Governing Board Members
* One (1) copy of the organization’s Letter of Determination from the Internal Revenue

Service certifying 501(c)(3) status, or equivalent.

This is an actual letter from the IRS, not from the State of Ohio or a certificate. If you cannot locate your Letter of Determination, contact them at 1 (877) 829-5500. Provide them with your organization’s Tax Identification Number and a copy of your letter will be mailed or faxed to you. Do not wait until the last minute to obtain a copy of this letter. Your application will not be accepted of the Letter is not included by the submission deadline.