

# **Cedarburg Junior Woman's Club Community Assistance Grants Program**

Amount Requested: \$250-\$500

Note: Funds will not be available for distribution until May 2019

**Application Deadline:  
March 15, 2019**

**Return Application To:**

**CAG Chair  
Cedarburg Junior Woman's Club  
PO Box 205  
Cedarburg, WI 53012-0205**

Questions regarding application or eligibility please contact:  
Debbie Schachenman 262-365-1348 or [schachenman5@gmail.com](mailto:schachenman5@gmail.com)

**Cedarburg Junior Woman's Club  
Community Assistance Grants Program**

Since its inception in 1953, the Cedarburg Junior Woman's Club has been one of the catalysts for positive change in our community. Cedarburg Junior Woman's Club members, through their volunteer and fund-raising efforts, have created and/or supported over 150 organizations. CJWC continually monitors community needs and focuses its efforts on supporting local organizations and programs striving to meet community needs.

The Community Assistance Grants (CAG) program is designed to provide money to area non-profit organizations to support projects or activities that will make an impact on women, children and families. CJWC invites non-profit organizations to submit applications for project development, training, and educational needs throughout the year. Grants are awarded to applicants that meet the CJWC guidelines. The guidelines exist to help the CJWC respond to community needs of non-profit organizations.

Each recipient organization will assist CJWC in publicizing the applicant's receipt of such award with a description of the program details. A written report accounting for the use of the granted funds is required of each recipient organization no later than 90 days following the receipt of the award.

# COMMUNITY ASSISTANCE GRANTS APPLICATION

## I. ORGANIZATION INFORMATION

Today's Date \_\_\_\_\_

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

Address \_\_\_\_\_

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

Contact Person: Name & Title \_\_\_\_\_

Telephone Number/Fax Number/E-Mail Address \_\_\_\_\_

Name of Program \_\_\_\_\_

Amount requested \_\_\_\_\_ Date funds are needed \_\_\_\_\_  
\*\$250-\$500

## II. Please check which of the following best describes how your program/project aligns with the CJWC goals:

- Responds to a critical human or community need
- Explores new opportunities for addressing existing or emerging issues of concern to CJWC and the community
- Addresses specific training or educational need of program participants (non-employees)
- Other: \_\_\_\_\_

## III. To be considered, one copy of the following components must be submitted:

1. This application as a cover page
2. A narrative (maximum two pages, minimum 12 pt font, typed on white paper) describing the proposed program/project for which funds are being requested. This narrative should include:
  - **NEED:** Describe the need for the program/project, including whether the services or activities are provided elsewhere.
  - **OBJECTIVES:** Clearly state measurable objectives. If appropriate, include the total number of persons to be served.
3. Proof of Non-Profit status. Copy of 501©(3)

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

**Cedarburg Junior Woman's Club**

## Community Assistance Grants Project/Program Budget Form

DESCRIPTION	COLUMN A AMOUNT REQUESTED FROM CJWC	COLUMN B AMOUNT FROM OTHER SOURCES	SPECIFY OTHER SOURCES & INDICATE IF COMMITTED OR PENDING	COLUMN C= A+B TOTAL PROJECT/ PROGRAM BUDGET
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### *Personnel Expenses*

Employee Salaries	X			
Fringe Benefits/ payroll taxes	X			
Consultants				
Other				
<i>Sub-total</i>				

### *Other than Personnel Expenses*

Rent/Space				
Utilities				
Equipment				
Materials/ Supplies				
Travel				
Telephone				
Postage				
Printing				
Bookkeeping				
Audit	X			
Insurance				
Tuition/ Registration				
Other (specify)				
<i>Sub-total</i>				

<i>Total</i>				
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X represents expenses the CJWC will not fund.

Please attach an additional sheet, if necessary, to provide information regarding committed and pending other revenue sources for this proposed project/program.