

American Women's Club of the Philippines

Community Services Grant Application



Thank you for your interest in applying for a donation of funds from the American Women's Club of the Philippines (AWCP). AWCP grants are not limited to any one type of project. In the past, AWCP funding has provided school scholarships, sponsored surgeries and medical treatments, purchased needed medicines, supplies and equipment, and has provided assistance in the repair, maintenance and building of facilities. Our policy and guidelines are as follows:

1. AWCP grants cannot be used to promote any specific religious or political viewpoint.
2. Grants are intended to be supplemental, and should not relieve the organization of their responsibility to provide on-going assistance.
3. Requests for grants in the event of a major disaster should take the form of projects with long-term benefits.
4. All organizations receiving grants from AWCP must supply receipts of the expenditures and documentation that the project was completed.
5. All grant recipients must complete this application form.
6. **Previous support from AWCP does not guarantee future financial support.**

Instructions for completing this Application

1. Please provide the information requested on pages 2, 3 and 4. **DO NOT COMPLETE PAGE 5.** Page 5 is for AWCP use only.
2. You may attach additional sheets of paper should you need more space, but we encourage brief, thorough answers.
3. Application should be typed or legibly printed.
4. With the completed application form, you must submit the following:
 - A copy of your SEC or DTI registration
 - A copy of your DECS Certification (for all schools)
 - A copy of your Articles of Incorporation and By-Laws
 - A list of your Board of Directors, including their positions
 - An annual report or brief history of your accomplishments from the previous year
 - A program/project budget including projected expenses
 - Any brochures or pamphlets regarding your organization or project

Return completed form to:

American Women's Club of the Philippines
c/o Community Services Committee
48 McKinley Road, Forbes Park, Makati City or
Unit 401 Park Trade Center, 1716 Investment Drive, Madrigal Business Park, Alabang

If you have questions regarding the completion of this application, please leave a message with the AWCP Makati Office (817-7587) or AWCP Alabang Office (850-0901 or 772-5673), and a Committee member will return your call.

Name of Organization: _____
Telephone #: _____
Fax #: _____
E-mail: _____

Contact Name: _____
Position: _____
Telephone #: _____

What is the mission or purpose of your organization?

How old is your organization? _____

Are you registered with the SEC? Yes No

If no, what other government registration do you carry?

If you apply for educational funding or school support you must attach a copy of DEC Certification.

Are you in need of any used items such as clothing, toys, books, etc.? Yes No

If yes, please list: _____

Do you have any volunteer opportunities for AWCP members? Yes No

If yes, please describe the type of help needed: _____

What are the other funding sources for your organization? (Check all that apply)

- Individual donations
- Government funding
- Sale of items or services (e.g. cards, T-shirts, etc.)
- Charitable organizations (other clubs, rotary, religious organizations)
- Corporate funding
- International agencies

Please list the names of organizations, corporations, or international agencies that currently donate to your organization:

What are the sources of funding your organization has for this project?

Source of Funding

Amount

Committed or Pending?

In the event that your grant is approved, your organization is required to submit a receipt of monies received and a report after your project is completed. Verification of project completion can be accomplished by a written report, school records, photographs, or a site visit by AWCP members. How do you plan to provide documentation to prove that your project has been completed?

PROJECT NARRATIVE

Please include a project description that is a minimum of two and no more than four pages. The narrative should be typed and double spaced. Please include the following:

1. Name of Project
2. Amount of money requested
3. Date funding is required
4. Description of the Project
5. Why this grant is needed
6. Who (and how many) will benefit from the proposed project and how will they benefit?

Do not complete this page. FOR AWCP USE ONLY.

Date: _____

Name of Organization: _____

AWCP Member: _____

Telephone #: _____

Project Officer: _____

Telephone #: _____

Date and initial:

_____ Initial Board Presentation _____ Letter of Confirmation/Denial

_____ Final Board Presentation _____ Site Visit

_____ CS Committee Approved/Denied _____ Voucher Written

_____ Board Approved/Denied _____ Receipt Received

_____ Follow-up Documentation

Previous support from AWCP? Yes No Year: _____

Amount Requested: _____ Amount Granted: _____

Check payable to: _____

Check Number: _____ Voucher Number: _____

Budget Category:

- _____ Annual Budget Grant
- _____ Children's Medical Memorial Fund
- _____ Special Grant
- _____ American Red Cross
- _____ Tree of Love
- _____ Other

Proposal:

Comments and Other Information: