

THE SAVANNAH  
**COMMUNITY**  
FOUNDATION, INC.

Telephone & Facsimile  
(912) 921-7700

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Savannah, Georgia 31406  
[www.savfoundation.org](http://www.savfoundation.org)

[grants@savfoundation.org](mailto:grants@savfoundation.org)

## IMMEDIATE NEEDS FUND

### GRANT CRITERIA

#### GRANTS FROM THIS FUND MAY BE MADE ONLY FOR "IMMEDIATE NEEDS."

"IMMEDIATE NEEDS" INCLUDE EMERGENCY NEEDS, AS WELL AS OTHER UNANTICIPATED EXPENSES. "IMMEDIATE NEEDS" DO NOT INCLUDE CAPITAL EXPENDITURES, CAPITAL CAMPAIGNS, ROUTINE RECURRING EXPENSES, OR NORMAL PROGRAM EXPENSES. GRANTS WILL NOT EXCEED \$5,000 PER GRANT (TYPICAL AMOUNTS ARE LESS THAN \$1,500.00), AND NO ORGANIZATION WILL BE GRANTED MORE THAN \$5,000.00 TOTAL WITHIN ANY TWELVE (12) MONTH PERIOD.

Grant requests should be submitted via email (**preferably**) or fax (912) 921-7700 using the information in our letterhead above.

1. Exact legal name of the requesting organization: \_\_\_\_\_

2. Name of the organization's contact person for this grant request: \_\_\_\_\_

3. Requesting organization's mailing address: \_\_\_\_\_

4. Organization's phone number and email address: \_\_\_\_\_

5. Organization's Tax Identification Number: \_\_\_\_\_

6. Is the requesting organization classified by the Internal Revenue Service as a Section 170(b)(1)(a) organization or Section 501(c)(3) "public charity" that is not a Section 509(a)(3) "supporting organization" or "private foundation"?

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

7. Organization's mission: \_\_\_\_\_

8. Organization's fiscal year beginning and end: \_\_\_\_\_

9. Organization's total budgeted revenues and expenses for the current fiscal year: \_\_\_\_\_

10. Organization's top three (3) sources of revenue and amount from each source: \_\_\_\_\_

11. Please list the dates, amounts and brief description of all other grants received by your organization from **ANY FUND** of The Foundation within the thirty-six (36) months preceding the date of this application. Use additional pages if necessary.

A. Date \_\_\_\_\_ Fund \_\_\_\_\_ Amount \_\_\_\_\_

Description \_\_\_\_\_

B. Date \_\_\_\_\_ Fund \_\_\_\_\_ Amount \_\_\_\_\_

Description \_\_\_\_\_

C. Date \_\_\_\_\_ Fund \_\_\_\_\_ Amount \_\_\_\_\_

Description \_\_\_\_\_

12. Please attached a list of your current officers and directors.

13. Is the grant requested (a) for a budgeted item? \_\_\_\_\_ Yes \_\_\_\_\_ No

(b) for a capital expenditure? \_\_\_\_\_ Yes \_\_\_\_\_ No

(c) for a capital campaign? \_\_\_\_\_ Yes \_\_\_\_\_ No

(d) for an ongoing project expense? \_\_\_\_\_ Yes \_\_\_\_\_ No

14. Are additional materials attached/enclosed?

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

15. **Exact dollar amount requested** \_\_\_\_\_. If the full amount is not awarded, are other funds available to cover the shortfall? \_\_\_\_\_ Yes \_\_\_\_\_ No

16. Is this grant request time sensitive (i.e., requires a response in less than 30 days)?

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

17. Brief statement of grant request: \_\_\_\_\_

\_\_\_\_\_

18. Narrative statement of grant request (attach additional pages if necessary): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

19. Why is this request for an "immediate need" as defined above? \_\_\_\_\_

\_\_\_\_\_

20. Signature: \_\_\_\_\_ Print name \_\_\_\_\_

Title \_\_\_\_\_

21. Date of submission \_\_\_\_\_, 20\_\_\_\_