



Please contact the staff of the Rush County Community Foundation if you have any questions concerning your organization's eligibility, project, and/or documentation required for this application.

Does your agency or organization need financial help right now to respond more effectively to the COVID-19 health crisis? Let us help you help others! You may request up to \$5,000 and receive funds without delay.

Follow instructions carefully and provide information in the order it is requested. Do not use binders, folders, or notebooks. Complete the entire application. The application must be printed or typed. Simply compile and staple multiple pages in the upper left hand corner.

The Rush County Community Foundation does not discriminate in matters of age, race, religion, sex or native origin and expects that grant applicants observe like standards.

All information must be completed or your application will not be considered.

APPLICANT ORGANIZATION: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: _____ FAX: _____ EMAIL: _____

IRS 501(c) (3) FEDERAL ID NUMBER: _____

EXECUTIVE DIRECTOR, PHONE AND EMAIL: _____

CONTACT PERSON, PHONE & EMAIL: _____

Tax exempt organization name: _____
 (as listed on legal documents)

Address & Phone: _____
 (if different from applicant listed above)

AMOUNT REQUESTED \$ _____ TOTAL PROJECT COST \$ _____

PURPOSE OF REQUEST: (How will the grant money be used? What need(s) are you addressing? (Must fit in this space):

Are any other funding opportunities for this project? _____
 Detail others: _____

What is your major funding source? _____

Do you receive government funds? _____ If so: Federal State Local

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DESCRIBE WHAT YOU INTEND TO ACCOMPLISH AND WHO WILL BE IMPACTED IF AWARD FUNDING: (What positive, measurable differences do you anticipate? How many citizens do anticipate impacting? Be specific.)

ATTACH BUDGET: Identify dollars requested and how funds will be specifically utilized

If the Foundation is not able to fund the full amount of your grant request would you be able to continue with your project and how would you fund the balance of your project? _____

What is your major funding source?

From my own knowledge, I certify that the information given on this application and submitted in relation to this proposal is correct. This proposal has been authorized by the governing board.
Must have 2 different signatures.

Printed Name & Title of the person submitting application _____

Signature of person submitting application _____

Printed Name and Title of Governing Board Officer _____

Signature of Governing Board Officer _____

**Submit application to: Rush County Community Foundation
117 North Main Street Rushville, IN 46173
Phone 765-938-1177 Fax 765-938-1719
Email: info@rushcountyfoundation.org**

Grant applications will be accepted as long as the need exists or as long as the specially created Rush to Help: COVID-19 Rapid Relief Fund is able to grant gifts.