GRS Grant-In-Aid Application

What previous activities has it run? _____

If other than a group, please indicate the principals in your organizations: _____

_____

What experience have you had that indicates you can successfully carry out the project? _____

_____

Additional Comments: _____

_____

#6) Previous GIPRC/GRS Grants:

Have you received GIPRC/GRS Grant-in-aid assistance before? YES___ NO___ What year? _____

Are you applying for an additional grant at this time? YES___ NO___

What is the primary function of your group? _____

_____

Additional Comments: _____

_____

Funding Request

How much of your "shortfall" will you be applying for (grant limit is $1,000.00)? $_____

Alternate amount requested (optional). $_____

Will your event proceed should your application not be successful? YES___ NO___

Should your project make a profit, what will you do with the funds? _____

Additional Comments: _____

_____

_____ _____

Signature (State position if signing on behalf of an organization.) Date

Please Note: Applicants may receive less than the requested amount.