

Dear Applicant:

Thank you for your interest in Speedway Children’s Charities (SCC) regarding funding for your project/program. As you may know, the Kentucky Chapter of SCC is dedicated to helping children in need. We coordinate and execute various events throughout the year to raise funds to distribute to worthy children’s organizations. Therefore, it is our pleasure to present to you the **2017 SCC Kentucky Chapter Grant Application**.

To apply for a grant, an applicant organization must meet the following requirements:

* Organization must be an existing 501(c)(3) non-profit entity whose primary focus is children
* Organization must be located in and serve children in one of the following geographical areas:
  + Commonwealth of Kentucky
  + Butler, Clermont or Hamilton Counties in Ohio
  + Clark, Dearborn, Decatur, Franklin, Jefferson, Jennings, Ohio, Ripley, Scott or Switzerland Counties in Indiana
* Organization must keep all funds within the service area identified above
* Service provided must fall within one of the categories identified in the mission of SCC: educational, medical, social and/or financial need for children

As you will see in the grant application, your project or program must directly affect the needs of children. Please read the addendum **in its entirety prior to** completing your application, as it contains crucial information regarding what qualifies as an eligible project for the review process.

SCC will consider one grant request per federal Tax ID number each year. If your non-profit has more than one organization/chapter functioning under the same Tax ID number, we ask that you select one organization/chapter to apply to SCC for funding.

**The application must be postmarked on or before Thursday, August 31, 2017.** Absolutely no exceptions will be made, and applications will not be accepted via fax, e-mail or hand delivery. Please supply all requested information and attach the proper documents to the application. **If any field of the application is left blank or documents are not provided upfront, your application will not be accepted or reviewed.**

Priority is not given to applications that are received first, as all applications are discussed at the same time. We are looking for the most accurate information heading into your project/program, not who can submit their application first. ***Once submitted, please no phone calls or e-mails to check the status of your application, as it interrupts the progression of reviewing these documents and slows down the process for all who have applied.***

The Kentucky Chapter Board of Trustees will meet in early November to make final decisions on the awarding of grants. Following that meeting, you will be notified in writing whether or not your charity will receive funding. SCC will notify every organization who applies for a grant of its decision in writing when it is determined, whether fulfilled or not. Grant checks will be distributed by SCC in early December.

If you have any questions regarding the content of this document, please contact Dayna Winslette via e-mail at [dwinslette@kentuckyspeedway.com](mailto:dwinslette@kentuckyspeedway.com) or via phone at 859-567-3417. Thank you again for your interest in Speedway Children’s Charities. We wish you only the best in all of your endeavors on behalf of children in our community!

Best wishes,

Dayna Winslette

Director of Kentucky Chapter

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##### GRANT APPLICATION CHECKLIST

To be considered for review, a complete grant application to Speedway Children’s Charities **MUST** include **ONE (1) copy of EVERY document listed below, unless otherwise indicated.**

SCC Kentucky Chapter Grant Application (TWO COPIES: the original & one copy; no front-and-back printing)

Organization’s Overall Financial Documents (as requested in Question 5A)

IRS 501(c)(3) Verification/Determination Letter

Organization’s Insert/Brochure (if applicable)

Organization’s Board of Directors (unless already provided in your insert/brochure)

Mission Statement (unless already provided in your insert/brochure)

Organizational Chart (does not have to include specific names, must at least include titles/positions)

***\*\*Please note: No staples please. Front-and-back printing is okay for all documents EXCEPT the original application and its copy.***

Applications should be submitted in a tabbed manila folder with the organization’s name indicated on the tab. Pocket folders are also acceptable; however, applications that are submitted in pocket folders or loose-leaf (without a folder altogether) will be transferred to manila folders when received for our internal filing system. Please no three-ring binders, three-prong folders or hole-punched paperwork.

**All grant applications must be completed and postmarked on or before Thursday, August 31, 2017.** Grant applications must be completed in their entirety in order to be accepted and reviewed. You may reproduce this application, but you must answer the questions in the order and form in which they are requested. Please supply/attach only the documentation that is requested. **Unsolicited information will not be considered (i.e., videos, marketing materials, yearbooks, catalogues, etc.)**.

The grant application must be completed using our standard form. You may include solicited attachments as a supplement to your answers. However, do not use those attachments as the sole answer to our direct questions.



2017 SCC KENTUCKY CHAPTER GRANT APPLICATION

**Mission Statement:** The mission of SCC remains true to the ideals it was founded upon in 1982: To care for children in educational, financial, social and medical need in order to help them lead productive lives.

Through its eight chapters, SCC provides funding each fiscal year for hundreds of non-profit organizations throughout the nation that meet the direct needs of children. The Kentucky Chapter of SCC, though, keeps all funds local, within its own community. Our vision is that every child has the same opportunities no matter what obstacle they are facing.

**Please type your answers in standard size font (preferably 11-point) in the space provided.**

1. **Applicant Organization *(answers should pertain to the overall organization, not the project/program indicated in Question 2)*:**

Legal Name of Organization (as listed on IRS Form 990):

Tax ID Number:

Contact Person’s Name:

Contact Person’s Title:

Mailing Address:

Phone Number:

Fax Number:

E-mail Address:

Year Founded:

Scope of Services:

Organizational Goals:

Current Programs:

Number of People Served:

Number of Children Receiving Services:

Geographical Area(s) Served:

**GRANT AMOUNT REQUESTED (must be $10,000 or less): $**

2. **Project/Program Narrative (250-word limit):** Provide a brief description of the proposed project/program for which you are requesting grant funding. Specific to this project, include your goals, number of children served, how children will benefit directly, measurable objectives and whether this is a new or ongoing/annual project. Remember: Your project must directly meet the needs of children and be a specific project/program within your organization.

3. **Qualifications of Project Personnel:** Provide a brief summary of the qualifications of key individuals who will be responsible for implementing the project. This could include Board Members, staff, volunteers, etc.

4. **Project Duration:** If this will be an ongoing project, please include the long-term strategies for funding this project at the end of the grant period (e.g., state or federal support, grants, fundraisers, etc.).

5. **Fiscal Information:**

A. For the overall organization, please attach the following requested financial documents:

Most recent year’s IRS Form 990 or Auditor’s Report with Consolidated Financial Statements

Current year’s annual operating budget

Projected budget for the forthcoming year (if available at this time)

B. Provide details as to how the funds requested will be used by completing the project/program budget below to summarize and support your request. ***This form must be used and pertains to the project/ program only, not the overall organization.*** It is acceptable for the worksheet to run onto a second page.

**PROJECT/PROGRAM BUDGET—CURRENT REQUEST**

**Project/Program income**

|  |  |  |
| --- | --- | --- |
| **Source** | **Amount Committed** | **Amount Pending\*** |
| Government contracts | $Click here to enter text. | $Click here to enter text. |
| Earned income | $Click here to enter text. | $Click here to enter text. |
| Government grants | $Click here to enter text. | $Click here to enter text. |
| Foundations | $Click here to enter text. | $Click here to enter text. |
| Corporations | $Click here to enter text. | $Click here to enter text. |
| United Way or federated campaigns | $Click here to enter text. | $Click here to enter text. |
| Individual contributions | $Click here to enter text. | $Click here to enter text. |
| Fundraising events and products | $Click here to enter text. | $Click here to enter text. |
| Membership income | $Click here to enter text. | $Click here to enter text. |
| In-kind support | $Click here to enter text. | $Click here to enter text. |
| Investment income | $Click here to enter text. | $Click here to enter text. |
| Other *(please specify)* | $Click here to enter text. | $Click here to enter text. |
| **TOTAL INCOME** | **$Click here to enter text.** | **$Click here to enter text.** |

*\*Note: Pending sources of support include those requests currently under consideration. Please indicate anticipated date of notification beside each pending amount.*

### PROJECT/PROGRAM EXPENSES

|  |  |  |
| --- | --- | --- |
| **Item** | **Estimated Amount** | **Amount Requested from SCC#** |
| Salaries and wages *(break down below by position and indicate full- or part-time)* |  |  |
| Click here to enter text. | $Click here to enter text. |  |
| Click here to enter text. | $Click here to enter text. |  |
| Click here to enter text. | $Click here to enter text. |  |
| Insurance, benefits and other related taxes | $Click here to enter text. |  |
| Consultants and professional fees | $Click here to enter text. |  |
| Travel | $Click here to enter text. |  |
| Equipment *(can request from SCC ONLY if used specifically by children)* | $Click here to enter text. | $Click here to enter text. |
| Supplies *(can request from SCC ONLY if used specifically by children)* | $Click here to enter text. | $Click here to enter text. |
| Printing and copying *(can request from SCC ONLY if used specifically by children)* | $Click here to enter text. | $Click here to enter text. |
| Telephone and fax | $Click here to enter text. |  |
| Postage and delivery | $Click here to enter text. |  |
| Rent and utilities | $Click here to enter text. |  |
| In-kind expenses | $Click here to enter text. |  |
| Depreciation | $Click here to enter text. |  |
| Other *(break down below by grouping like items in related categories – this is for any line item not already listed above)* |  |  |
| Click here to enter text. | $Click here to enter text. | $Click here to enter text. |
| Click here to enter text. | $Click here to enter text. | $Click here to enter text. |
| Click here to enter text. | $Click here to enter text. | $Click here to enter text. |
| **TOTAL EXPENSES** | **$Click here to enter text.** | **$Click here to enter text.** |

*#Note: Please refer to the list of ineligible categories on the addendum before completing the amounts requested from SCC. Please indicate highest priority, next highest and so on beside each amount requested from SCC on the worksheet above.*

6. **Has your organization received Speedway Children’s Charities funding in the past?**

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

If yes, what is the most recent year your organization received funding from SCC? \_\_\_\_\_\_\_\_\_\_\_\_\_

Amount of last grant: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please provide a brief narrative of how SCC funding affected your project/program. *(250-word limit)*

7. **Certification:**

*The signature of the Board President or Authorizing Official and Project Coordinator (if different) are required. Any proposal received without these signatures will not be reviewed.*

By signing below, you acknowledge and understand that all information contained within this application, including all attachments, is true and correct to the best of our knowledge. Also, you verify that, if awarded, this funding will be used exclusively for the project and the express intent outlined in this application. If funding is not used as outlined and agreed upon by SCC, I acknowledge that my organization is responsible for reimbursing the amount of the grant to SCC immediately.

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Signature, President of Board of Directors Signature, Project Coordinator

or Authorizing Official

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Type or print the name, position and Type or print the name, position and

address of the person listed above address of the person listed above

***The applicant should retain a copy of the full application for his/her files.***

*Applications must be postmarked on or before Thursday, August 31, 2017. Any application that is not complete when received by SCC or is not postmarked appropriately will not be accepted or reviewed.*

**Please submit completed applications to the following address:**

**Speedway Children’s Charities**

**Attn: Dayna Winslette**

**1 Speedway Drive**

**Sparta, KY 41086**

*Once submitted, please no phone calls or e-mails to check the status of your application, as it interrupts the progression of reviewing these documents and slows down the process for all who have applied.*



**ADDENDUM TO GRANT APPLICATION**

Due to the large volume of applications received, Speedway Children’s Charities cautions applicants that SCC cannot fulfill every grant request or guarantee full funding of the requested amount.

All grant applications must be completed and postmarked *no later than Thursday, August 31, 2017*. Grant applications must be completed in their entirety, with requested documentation, in order to be accepted.

If your organization does not meet the following eligibility requirements, your application cannot be reviewed or approved:

* Grant requests must be made for a **specific project or program**. *Simply stating it is in support of a children’s program does not qualify as a specific project*
* No requests over $10,000 will be accepted
* Your organization must be tax-exempt under section 501(c)(3) of the Internal Revenue Service Tax Code
* Your organization must be located in and serve children in one of the following geographical areas:
  + Commonwealth of Kentucky
  + Butler, Clermont or Hamilton Counties in Ohio
  + Clark, Dearborn, Decatur, Franklin, Jefferson, Jennings, Ohio, Ripley, Scott or Switzerland Counties in Indiana
* Your organization must keep all funds within the service area identified above
* Your project for which grant funds are being requested must directly meet the needs of children as stated in our Mission Statement
* Ineligible categories for funding:
* Organizations that deny service to a potential client or beneficiary on the basis of race, religion, color, gender, sexual orientation, age or national origin
* Start-up organizations with less than one (1) calendar year of operation under your 501(c)(3) status
* Individual schools in public school systems, other than efforts to benefit system-wide programs and initiatives
* Religious organizations, unless they are engaged in a significant project that is nonsectarian and benefits a broad base in the community
* Individuals
* Capital funding campaigns
* Construction of buildings, remodeling projects, repairs, maintenance or pest control
* Vehicle purchases, insurance or maintenance
* Development or production of books, films, videos or television programs
* Sponsorship for conferences, events, fundraisers, etc.
* Scholarship programs
* Salaries, consulting fees, insurance, hiring, training, etc.
* General operating expenses (e.g., purchase of general office supplies, postage, travel, auditing fees, licensing fees, rental fees, electronic devices for general office use, etc.)

At the discretion of the Kentucky Chapter Director, SCC may arrange a call or meeting with contacts of specific organizations to gather further information after a grant application has been received by SCC. This is mainly to clarify information you have provided in your application, so the Board of Trustees can make an educated decision during the review process.

If you have any questions regarding the grant application prior to submitting your documents, please contact Dayna Winslette via e-mail at [dwinslette@kentuckyspeedway.com](mailto:dwinslette@kentuckyspeedway.com) or via phone at 859-567-3417.