

Miracle House Foundation

The Board assures that all actions of the organization further our mission by providing funds toward the construction of new homes and the improvement of housing conditions for limited income Native American families.

Grant Application

Date: _____

Name of organization requesting grant: _____

Mailing Address: _____

Contact person: _____ Contact Phone: _____

Contact email: _____ Contact Fax: _____

Amount requested: _____ When are funds needed: _____

Period grant will cover: _____

Name of project: _____

Exact purpose of the funds: _____

Detailed breakdown of cost (PLEASE ATTACH ALL BACKUP INFORMATION): _____

Are there similar projects/services available in the community? No Yes

If yes, describe how your product/service is different. _____

How does this request further our mission? _____

Miracle House Foundation requests a letter summarizing the outcome of the grant/sponsorship at the end of the project. Will the applicant provide an outcome letter? Yes No

Authorization ~ The undersigned certifies that they are authorized to represent the organization applying for the grant/sponsorship and that the information contained in this application is accurate. The undersigned agrees that if a grant/sponsorship is award to the organization:

1. the grant/sponsorship will be used for the purpose outlined in this application and may not be expended for any other purpose without prior written approval from Miracle House Foundation's Board of Directors,
2. information about the organization and the grant/sponsorship may be used by Miracle House Foundation.

Signature _____

Date _____

Please attach any additional information regarding your request.

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Board of Directors Use Only

Date reviewed by the Grant Committee: _____ Recommended to the Board? No Yes

Date reviewed by the Board of Directors: _____ Approved – amount approved: _____

Disapproved – reason: _____

Other – describe: _____

Treasurer – Check #: _____ Date Check mailed: _____

Secretary – original filed with corporate documents: Yes No