

## Individual Grant Application Form

Please read and complete all required information and submit together with all the requested documentation.

1. First Name, Initial, Last Name:

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2. Other Names You May Have Used:

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3. Residence Address:

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4. Date of Birth:

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5. Phone (home and cell):

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6. The Do Gooders provide limited one-time grants of up to \$1500 to the “poor and distressed” as a part of its Section 501(c)(3)) charitable purpose. Describe how you qualify as poor or distressed. Provide detail and documentation .

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7. Requested Funds: \$ \_\_\_\_\_.

Select Below What Purpose the Funds Will Be Used For and Provide Substantiating Documentation:

- \_\_\_\_\_ Temporary Mortgage, or Rent Payments or Temporary Housing Costs
- \_\_\_\_\_ Non-Insured Medical Expenses
- \_\_\_\_\_ Car Repairs
- \_\_\_\_\_ Funeral Expenses
- \_\_\_\_\_ Travel Costs to Attend Funeral of Immediate Family Member or to Visit an Immediate Family Member in the Hospital
- \_\_\_\_\_ Non-Subsidized Elementary or Secondary School Expense
- \_\_\_\_\_ Other Disaster Relief Costs.

Explain: \_\_\_\_\_

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8. Provide a Detailed Breakdown if the Request Involves More than One Payee:

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9. I hereby certify that I am not providing any goods or services to The Do Gooders, and any grant awarded to me would not be the payment of compensation or for a waiver of any rights.

10. The Grants Committee of The Do Gooders reserves the right to ask you for additional support for Items 6 and 7 above. The Do Gooders also reserves the right to make payment of the grant to directly to the Payee for the benefit of the Grant Awardee. In addition, the Grant Awardee may be required to report back to The Do Gooders on how the grant was used.

I have read, understand and agree to the terms set forth above. I hereby verify the authenticity of all information provided by me above and give my consent for sharing it with The Do Gooders' Grant Committee.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

