



Fort Bend Junior Service League

P.O. Box 17387 • Sugar Land, Texas 77496
Phone: (281) 636-6272 • Fax: (713) 559-8363
E-mail: President@fbjssl.com • www.fbjssl.com

Community Assistance Fund Application

Fiscal Year 2010-2011

MISSION STATEMENT:

The Fort Bend Junior Service League is an organization of women committed to promoting volunteerism, to developing the potential of women and to improving the Fort Bend County community through the effective action and leadership of trained volunteers. Our purpose is exclusively educational and charitable as well as providing an atmosphere of friendliness, goodwill and camaraderie for all members.

Agency Name

Contact Person

Telephone

Email Address

Mailing Address

Street Address (if different)

Internet Site Address

Fax Number

Executive Director

Telephone

Email Address

Board Chair

Telephone

Email Address

Please check one of the following:

New Agency (An agency with no prior relationship with FBJSL)

5. Please provide any information relating to a funding deadline for your agency's request:

6. Would your agency be willing to accept partial funding?

Please include the following information with your completed application:

- Current budget
- Copy of latest financial statements (audited, if available)
- Copy of current IRS determination letter indicating 501(c)(3) tax-exempt status
- Current list of Board of Directors
- If you have additional information related to your grant request (i.e. project budget, replacement cost estimate, etc.) that may be helpful to FBJSJ in reviewing your application, please feel free to include it.

PLEASE SUBMIT COMPLETED APPLICATION & ATTACHMENTS IN DUPLICATE.

Disclaimers

By submitting a grant application, your agency is agreeing to notify FBJSJ immediately in the event funding for the item(s)/project(s) requested is committed or received from another source.

If requested, applicant agrees to provide an authorized representative(s) from your agency to meet with the FBJSJ Beneficiary Review Committee and/or FBJSJ Board of Directors to present and discuss its application.

Application is hereby made this _____ day of _____, 20____, for funds in the amount of \$_____ (\$5,000 maximum) on behalf of:

Official Name of Agency

Signature of Authorized Agency Representative	Printed Name	Title
---	--------------	-------

Funds in the amount of \$_____ have been approved by the Fort Bend Junior Service League, effective this ____ day of _____, 20_____.

FBJSJ President

This application constitutes a contract as to how the funds are to be spent. Any funds not spent for the specific purpose stated in this contract must be returned to the Fort Bend Junior Service League.

Thank you for applying for a Community Assistance Fund grant from FBJSL.