

## **THE SELFRELIANCE FOUNDATION**

### **DONATION APPLICATION INFORMATION**

1. All funding requests must be submitted on a Selfreliance Foundation Donation Application form and must include evidence of tax exempt 501(c)3 status;
2. The application must include the amount requested;
3. The Selfreliance Foundation Donation Application form should be submitted no less than two (2) months (60 days) prior to the event;
4. The application is to be submitted electronically to [foundation@selfreliance.com](mailto:foundation@selfreliance.com); if that is not possible, the application may be mailed to:

The Selfreliance Foundation  
2332 W. Chicago Ave.  
Chicago IL 60622

5. Incomplete applications may not be considered by the Selfreliance Foundation's Board;
6. If a detailed budget is not submitted for donation requests in excess of \$5,000, the Selfreliance Foundation Board may reject the donation request in its entirety.

### **GENERAL INFORMATION**

1. The Selfreliance Foundation reserves the right to review each request on a case-by-case basis;
2. Funding requests from organizations that are in good standing with SFCU and whose members are likewise in good standing with SFCU will be given preference;
3. A rejected donation request does not imply that the organization's project or event is unworthy, but simply that it does not fall within the Selfreliance Foundation's donation request guidelines or that funds are not available;
4. The Selfreliance Foundation will not provide written notification of a rejected donation request unless specifically requested to do so by the organization requesting funding;
5. The Selfreliance Foundation is not obligated to provide an underlying reason for a rejection;
6. The Foundation's Board meets monthly to review donation requests. Donation checks are issued within 10-15 days following a favorable decision by the Selfreliance Foundation Board;
7. Funding approved by the Selfreliance Foundation is to be properly and publicly acknowledged by the recipient;
8. Organizations that receive funding from the Selfreliance Foundation must use it for the project or public/community event noted in the Selfreliance Foundation Donation Application form. If, for any reason, the event does not take place or if the donation is not used for that purpose, the organization agrees to notify the Selfreliance Foundation, in which event the Foundation may, at its discretion, require the return of funds.

## **SELFRELIANCE FOUNDATION DONATION APPLICATION FORM**

**This form should be submitted no less than two (2) months (60 days) prior to the project or public/community event.**

Date: \_\_\_\_\_

### **ORGANIZATION INFORMATION**

1. Name of organization ("the Applicant"):
2. Is the Applicant a 501(c)(3) nonprofit organization? Yes      No  
If yes, attach evidence of tax exempt status.
3. EIN/Tax ID #:
4. Mailing address of organization:
5. Organization website:
6. Specify amount requested and the purpose of the funding request:
7. Does the Applicant maintain an active account at Selfreliance FCU? Yes      No
8. Name of primary contact, e-mail address & telephone number:
9. List Applicant's Board members:
10. Has the organization received support from the Selfreliance Foundation in the past?  
Yes      No

### **PROJECT OR EVENT INFORMATION**

Project or public/community event narrative:

I hereby verify that all the information provided in this application and any other supporting materials is true and accurate. I am an authorized agent of the organization requesting funding. Should the donation be approved, it will be used for the purpose listed above and will be publicly acknowledged. Selfreliance Foundation-approved artwork (such as logos, signs, etc.) will be used for promotional purposes.

Signature and Title of Contact Person:

Date:

Signed application and supporting documents must be e-mailed or mailed to:

E-mail: [foundation@selfreliance.com](mailto:foundation@selfreliance.com)

Mail:

The Selfreliance Foundation  
2332 W. Chicago Ave.  
Chicago IL 60622

**FOR SELFRELIANCE FOUNDATION USE ONLY**

Date Received:

Date Approved:

Approved Amount:

Date Rejected: