



## Grant Application Form

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In order to comply with the guidelines for BCHO's 501(c)3 Non-Profit status, donated monies are tracked and allocated using the BCHO Grant Process. The grant request for the project must be related and coincide with the BCHO five principals and its mission. For other Grant requirements see the BCHO Policy's & Procedures Manual section on Grant Policies.

### REQUESTING ORGANIZATION

BCHO Chapter Name \_\_\_\_\_

Responsible chapter officers: (Chapter President) \_\_\_\_\_

(Chapter Representative to BOD) \_\_\_\_\_

### CONTACT INFORMATION

Contact Person \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ FAX (\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_

### GRANT INFORMATION

Project Name \_\_\_\_\_

Estimated Project Cost \_\_\_\_\_ Grant Request Amount \_\_\_\_\_

Project Location \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Purpose of Grant/Award \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_

How does this project relate to the BCHO five principals and our mission \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_  
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List Included Attachments \_\_\_\_\_  
\_\_\_\_\_

Estimated start date: \_\_\_\_\_ Estimated completion date: \_\_\_\_\_

If project is travel expenses or donated items, initial here if tax receipt of in kind donation is requested in lieu of reimbursement: \_\_\_\_\_

Amount of project cost contributed by chapter: \_\_\_\_\_

Estimated amount of labor hours to be contributed by chapter: \_\_\_\_\_

Does chapter require; reimbursement at completion, in stages, or up front? (Circle one) Explain reason for request of funds disbursement:

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The below signing chapter officers accept responsibility for this grant request, the prudent management of any funds granted by BCHO, and the timely and accurate submission of the completion report to the BCHO BOD. The report must be submitted no later than 30 days after project completion.

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Chapter President

Chapter Representative to BOD

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Include any supporting documents or pictures and Send your completed Grant/Award Form to [grants@bcho.org](mailto:grants@bcho.org)

### **COMPLETION REPORT**

After completion of the project, please provide the following information.

Attach all of the following:

1. Date of project completion
2. Date completion report submitted
3. Narrative of project which includes highlighted support of BCHO 5 principles.
4. Pictures of before and after of the project area where appropriate.
5. Copy of a completed volunteer hours report for this project.
6. Project narrative suitable for publication if different from #1 above.
7. Explanation and signed check for any advanced funds returned to BCHO.
8. Original receipts for all expenditures paid for by grant funds or request for reimbursement as well as chapter contribution expenses.
9. List of all in kind donations made and if tax receipt is requested by the donor.