



**Women's Giving Connection-Southern Idaho Pooled Fund Grant**

**Grant Application for Funding Deadline: Applications must be postmarked by March 1st**

**Date:**

**Organization Name:**

**Website:**

**Address:**

**City / State / Zip:**

**County** (must serve residents in Twin Falls, Jerome, Gooding, Minidoka and/or Cassia counties):

**Grant Contact Person:**

**Title:**

**Telephone Number:**

**Email:**

**Tax ID Number (EIN#):**

**Is your organization a "subgroup" under any other Non-Profit? \*\*If yes, please complete and submit additional documentation and Form 501c3 of your umbrella organization**

**Date the organization was established:**

**How did you learn about this grant opportunity?**

**Does your Non-Profit receive 50% or greater funding for your operating and administrative budget through federal, state, or local government or tax funds? Please see Grant Guidelines and Criteria.**

**About Your Organization:**

- **Mission statement and purpose of your organization:**

- How many people do you serve annually?
- List your Board of Directors and officers:

- Employees (choose one of the following):

I confirm this non-profit has three or less full-time employees (or the equivalent i.e. six part-time employees).

I confirm this non-profit has more than three full-time employees.

### **Project Description:**

**Projects primarily funding administrative costs are NOT ELIGIBLE for funding.** Administrative costs are defined by the expenses necessary to cover the management and operation of the organization and include things such as salaries for W-2 salaried staff, accounting services, office rent, utilities, insurance, and office supplies. Funds associated with project based contract service employees would be eligible.

- Amount of grant funds requested (\$2,000 - \$10,000)

(Attach bids and line item budget if possible)

- Grant description – include goals, objectives, strategies, and benefits (attach no more than one - three pages of supporting information as needed):
- What will be the impact of this grant request in the immediate future and ongoing future? (e.g., how many people served, hours served, number of supplies, meals or visits)
- How will the grant funds be spent (e.g., purchase equipment, supplies, education, services)?
- Which county/counties would this grant serve?
- Is this a new initiative or continuation of current activities?
- Please explain any fundraising efforts your organization has done toward this goal, and if there are any matching funds available (attach any supporting documents as needed).

- Anticipated Start and completion dates:

- Indicate which of the following areas your request supports:

\_\_\_Education

\_\_\_Culture/Arts

\_\_\_Environment/Recreation

\_\_\_Health

\_\_\_Social Services

\_\_\_Civic and Community Improvements

\_\_\_Other (specify as needed) \_\_\_\_\_

Does your organization have a need for more volunteers? ( Please elaborate on the type of volunteers needed)

What else would you like us to know about this grant or your organization?

We, the authorized grantee, have read and acknowledge that we are in agreement and will abide by those criteria and procedures set out by Women's Giving Connection for consideration and receipt of these grant funds. The grantee organization also is solely responsible for all content, activities, and consequences of their organization's project supported by any grant funds. We further confirm that WGC is not responsible or liable for any problem or damage related to the execution or completion of this project. WGC may request grant project updates and is allowed to use any images for future promotional purposes.

\*Printed Name and Title: \_\_\_\_\_

\*Signature\_\_\_\_\_

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

Inquiries please email: [womensgivingconnection@gmail.com](mailto:womensgivingconnection@gmail.com)

Please submit your application by March 1st online or via mail

**(Must be postmarked by March 1, 2026)**

**Mail in applications: Please provide 3 copies of your application and mail to:**

Women's Giving Connection

PO Box 5910

Twin Falls, ID 83303

**Would your group be willing to host a site visit for any WGC members who are interested in seeing how the funds were used? \_\_\_\_\_Yes \_\_\_\_\_No**

**Would your group be willing to share photos etc. to showcase how the funds were used?**

**\_\_\_\_\_Yes \_\_\_\_\_No**