



THE SOUTH SASKATCHEWAN COMMUNITY FOUNDATION APPLICATION FOR A GRANT

Date of Application _____

Dollar Amount of Request \$ _____

Name of Organization _____

Office Address _____

City or Town _____ Postal Code _____ Telephone _____

Contact Person _____

Contact Address if Different from above _____

City or Town _____ Postal Code _____ Telephone _____

Department of National Revenue Business Number _____

Brief Statement of Organization Objectives _____

List of Officers and Directors _____

Principle Sources of Funding _____
