



**AMERICAN ASSOCIATION OF UNIVERSITY WOMEN (AAUW) - RAPID CITY BRANCH  
EQUITY GRANT PACKAGE FOR 2019**

Thank you for your interest in the 2019 AAUW Rapid City Branch Grant (request not to exceed \$2,000). The Equity Grant seeks to fund a Black Hills 501(c)(3) organization in its efforts to support women and girls in Western South Dakota in a program or project whose goal(s) align with AAUW's mission to advance equity for women and girls through advocacy, education, philanthropy and research.

Attached are three required forms:

1. The Grant Application Form.
2. The Grant Application Budget Form.
3. The Grant Application Sponsor Form. (One sponsorship by an AAUW member required.)

Criteria for charity recommendation includes:

1. Must have 501(c)(3) public charity determination from the IRS.
2. Must have a specific campaign, goal, program, project or need meeting mission of AAUW.
3. Must agree to make a permanent and public recognition of AAUW donation.
4. Must justify the outcome of specific campaign meeting the mission of AAUW.
5. Must **not** have received an AAUW Grant within the previous **three** years.

All forms and accompanying information must be returned to AAUW Equity Grant Selection, P.O. Box 8146, Rapid City, South Dakota 57709-8146 or [aauwrapidcity@gmail.com](mailto:aauwrapidcity@gmail.com) and postmarked by April 5, 2019. The selected organizations will be announced at the AAUW regular meeting on May 4, 2019. Representatives of the organization are encouraged to attend.

Thank you for your interest in our grant program and your contribution to the community. If you have any questions on completing the package, please don't hesitate to contact us.

Sincerely,  
Kathy Johnson, Co-President - AAUW Rapid City Branch  
605-391-9955  
[kj24054@gmail.com](mailto:kj24054@gmail.com)

**AMERICAN ASSOCIATION OF UNIVERSITY WOMEN (AAUW) - RAPID CITY BRANCH  
EQUITY GRANT APPLICATION 2019**

Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Is organization IRS qualified 501(c)3? Yes \_\_\_ No\_\_\_ **Organization must be a 501(c)3. Please attach proof to application.**

Amount of grant funds requested: \$ \_\_\_\_\_

Answer all of the following questions you feel are necessary to support your request for funds.

**1. Project to be funded:** \_\_\_\_\_

a. Number of people who will benefit from this project: \_\_\_\_\_

b. Gender/ages of those who will be served by this project: \_\_\_\_\_

c. Regional area covered by this project: \_\_\_\_\_

d. Describe the project: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(continue on back or separate sheet if needed)

e. How does the project support the mission of AAUW? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ (continue on back or separate sheet if needed)

**2. Give a general description of the organization, services provided and total number of people using the services/facility:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ (continue on back or separate sheet if needed)

**3. In what manner will AAUW receive recognition by the agency should your application be granted?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**4. Please complete the attached Budget Sheet.**

**Return Grant Application, Budget Form and 501(c)3 proof postmarked by April 5, 2019:**

AAUW Equity Grant Selection  
PO Box 8146  
Rapid City, SD 57709-8146  
aauwrapidcity@gmail.com

# AMERICAN ASSOCIATION OF UNIVERSITY WOMEN (AAUW) - RAPID CITY BRANCH

## GRANT APPLICATION BUDGET FORM

Budget Year: \_\_\_\_\_

- 1) Please submit a copy of your organization's most recent 990 form or financial statement in addition to completing the information below about the project you have described on page 2.

### 2) Project Budget:

**REVENUES:** Continue on back if needed.

Revenue Sources	\$	Revenue Sources	\$
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Total Revenue: \$** \_\_\_\_\_

**EXPENSES:** List salary expense by type (i.e. administrative vs. program). Continue on back if needed.

Expenses	\$	Expenses	\$
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Total Expenses \$** \_\_\_\_\_

**Number of people benefited:** \_\_\_\_\_

- 3) List the top three sources of funding (organization or individual) to your organization.

Contributor	\$	Contributor	\$
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

- 4) Does this organization actively participate in fundraisers? Yes \_\_\_\_\_ No \_\_\_\_\_

Fundraiser	\$ Raised	\$ Expenses	Fundraiser	\$ Raised	\$ Expenses
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

# AMERICAN ASSOCIATION OF UNIVERSITY WOMEN (AAUW) - RAPID CITY BRANCH

# Grant Application Sponsor Form

**AAUW Member Name:** \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**Name of Agency Sponsored for Grant Application:** \_\_\_\_\_

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**Mission of AAUW:** AAUW advances equity for women and girls through advocacy, education, philanthropy and research.

**Member statement of rationale for agency's grant application sponsorship with specific reference to how the project outlined on page 2 supports AAUW's Mission:**

[illegible]

**I am a member of AAUW Rapid City Branch in good standing. I agree to provide all necessary follow-up between the Branch and Agency should Agency receive funding.**

Sponsoring Member's Signature

Date \_\_\_\_\_

**Sponsor form must be submitted and postmarked by April 5, 2019 to:**

AAUW Equity Grant Selection  
PO Box 8146  
Rapid City, SD 57709-8146  
aauwrapidcity@gmail.com