



# DISASTER RELIEF FUND GRANT APPLICATION

United State Jaycees Foundation  
PO Box 64, IN 47547-0064

Chapter:  State:

Project Chair:  Phone #:  Email:

Chapter President:  Phone #:  Email:

State President:  Phone #:  Email:

*Please provide the following information pertaining to your project. Use additional sheets as necessary.*

### 1. Primary Purpose:

2. Amount Requested:  Submission Date:

### 3. Provide a brief description of the proposed project and the impact it will have on the community:

Estimated Project Start Date:  Estimated Project End Date:

### 4. List Specific Goals:

- a.
- b.
- c.
- d.

### 5. What resources will be used? (Other funding sources, manual resources, donated items)

### 6. Provide a preliminary budget outlining exactly how the granted funds will be utilized. **(Please attach)**

**7. Other Requirements:**

- 1. You are required to provide a preliminary report; preferably a Chairman’s Planning Guide (CPG) / Project Management Guide (PMG) which provides a detailed overview of the project. – **(Please attach)**
- 2. Contingent upon the length of the project, you will be required to provide updates regarding the progression of the project. **The progress reports should include before/during/after pictures of the project.**
- 3. Upon completion of the project you will be required to provide a completed Chairman’s Planning Guide (CPG) / Project Management Guide (PMG).
- 4. In addition to the Chairman’s Planning Guide (CPG) / Project Management Guide (PMG) you will be required to provide detailed accounting records of how the funds were spent, which **includes copies of all receipts.**

**8. Statement of Acknowledgement:**

I / We, \_\_\_\_\_ (Project Chair) and \_\_\_\_\_ (Chapter/State President), hereby concur with the aforementioned requirements and will submit all requested documentation within three months of the completion of the project. I / We acknowledge that failure to comply with the aforementioned requirements could result in having to repay the gifting funds in full or any amount thereof to the U.S. Jaycees Foundation.

\_\_\_\_\_  
Project Chair

\_\_\_\_\_  
Chapter/State President

**9. If awarded to what address will the funds be mailed**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**U.S. Jaycees Foundation Use Only:**

Approved/Denied \_\_\_\_\_ Awarded Amount: \_\_\_\_\_  
Date Funds Sent: \_\_\_\_\_

Comments:  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Disaster Relief Committee Chair

\_\_\_\_\_  
US Jaycees Foundation Chair

Submit Application Electronically with all Attachments to:  
U.S. Jaycees Foundation - Disaster Relief Committee  
[DisasterRelief@usjcfoundation.org](mailto:DisasterRelief@usjcfoundation.org)

The U.S. Jaycees Foundation and the Disaster Relief Committee retains the rights to request and obtain additional information they may deem necessary for an assessment to grant funding.