

Wood County Electric Charitable Foundation



APPLICATION FOR FUNDING

P.O. Box 1827 Quitman, TX 75783 • Phone: (903)763-2203 • Email: info_wcecf@wcec.org

Please complete the application and return with all supporting documentation by one of the following methods to the attention of: Tabatha Beal, WCECF Executive Secretary.

Email: info_wcecf@wcec.org

Mail: Wood County Electric Charitable Foundation

Hand Delivery: 501, S. Main St.
Quitman

PO Box 1827
Quitman, TX 75783

1. **Organization Name:** _____

2. **Physical Address** (if different): _____

3. **Mailing Address:** _____

4. **Contact Name:** _____

5. **Title:** _____

6. **Email Address:** _____

7. **Website:** _____

8. **Phone No. 1:** _____

9. **Phone No. 2:** _____

10. **Attach copy of organization's 501 (c) (3) letter, if applicable:** Y / N

11. **Provide copies of the organization's IRS Form 990 from the last 2 years.** Y / N

12. **Briefly describe the overall mission of your organization:** _____

13. **Describe the purpose of the funding request and how funds will be used:**

14. **What dollar amount being requested from WCECF?**

\$

15. **Name other funding sources for the project and amounts.** _____

16. WCEC & WCECF serve Camp, Franklin, Hopkins, Smith, Rains, Titus, Upshur, Wood & Van Zandt Counties. Describe your organization's impact in those counties:

17. Describe your organization's impact in areas outside of the above counties:

18. How, and how frequently, are your organization's programs measured for effectiveness?

19. Does your organization adhere to a nondiscrimination policy?

Y / N

20. Describe the demographic population your organization serves, such as underprivileged, over 65+, youth, physically or mentally handicapped, or other:

21. What is the deadline/timeline for your project?

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22. Will the activity's implementation be contingent on any factors other than funding, and if so, what?

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REFERENCES

23. Please provide 3 references (not directors/employees of Wood County Electric Cooperative, Inc. or the Wood County Electric Charitable Foundation.)

a.) **Name:** _____
Occupation: _____
Address: _____
Phone No: _____ **Phone No. 2:** _____

b.) **Name:** _____
Occupation: _____
Address: _____
Phone No: _____ **Phone No. 2:** _____

c.) **Name:** _____
Occupation: _____
Address: _____
Phone No: _____ **Phone No. 2:** _____

AGREEMENT OF TERMS

The undersigned, on behalf of Applicant, hereby:

- Understands and agrees that the information provided herein by Applicant is provided for the Wood County Electric Charitable Foundation to evaluate the possibility of offering or denying funds requested herein by Applicant;
- Understands funding and amounts, and denial of funding, are at the Board's sole discretion.
- Represents and warrants that the information provided herein is true and complete and may be relied upon in determining whether funds will be offered or denied;
- Understands and agrees that if a determination is made to offer funds to Applicant such funds, will be subject to the terms and conditions of a *Funding Agreement* that Applicant will be required to sign prior to any funds being delivered;
- Authorizes the Wood County Electric Charitable Foundation to make any and all inquiries as it deems necessary to verify the accuracy of the statements and representations made herein or by reference; and
- Represents that in his/her capacity for the Applicant that he/she has full, requisite corporate power and authority to sign and submit this Funding Request Application for consideration.

By (signature): _____
Name (print name): _____
Title: _____
Date: _____



DO NOT INCLUDE THIS SHEET WITH YOUR APPLICATION

APPLICATION GUIDELINES, PURPOSE AND SCOPE

- Organizations must serve communities and citizens within WCEC’s 9-county service territory (Camp, Franklin, Hopkins, Smith, Rains, Titus, Upshur, Wood, Van Zandt).
- Only one application per organization will be considered annually.
- Funds will only be awarded for future projects or events and will not be awarded for debt retirement or to pay down debt, endowments, capital projects, or for retroactive funding.
- Organizations must have a current 501 (c) (3) status with the IRS, and if not, must serve the public in a non-discriminatory fashion in a not-for-profit fashion. The Foundation will consider, but are not limit to, grant requests by these types of organizations: Volunteer Fire Departments, Food Banks, Civic Organizations, Child Welfare Groups, Economic Development Organizations, Health & Wellness Foundations, Animal Rescues, Museums & Libraries, Performing Arts Centers and Parks & Recreation Facilities.
- Grants, and grant denials, are at the sole discretion of the WCECF Board,
- For profit entities are excluded.
- Other activities and/or organizations, excluded include, but are not limited to: Individual or group registration fees (field trips, camp, etc.), salaries, scholarship programs or individual scholarships, political causes or lobbying, advertising, projects of religious denominations, unless regardless of religion for the benefit of the community at large (all youth, all elderly, etc.), repairs/improvements to private property or religious orders, organizations outside of WCEC service territory, unless a direct benefit is provided to a significant number of WCEC members, uniforms, personal athletic equipment, or general sponsorship for little leagues, dance teams, youth clubs, and the like, and requests that do not clearly define a specific project or purpose.
- The granting process relies on many factors including budget, number of requests, and WCECF board meeting schedules. It is expected that grant reviews will take place on a quarterly basis and the timing of notification of grants can take up to 4 months from time of request.

Self Check.

REQUIRED DOCUMENTS FOR CONSIDERATION		
	Item	Included
1.	Completed official application.	
2.	Copy of your organization’s tax exempt 501 (C) (3) letter.	
3.	Copies of last 2 IRS Form 990’s.	
4.	Supporting pertinent brochures/documents/project descriptions, to help the board consider your request.	
5.	Signature of authorized representative(s) of your organization.	
6.	Copy of your organizations Non-discrimination policy.	

