



Ronald McDonald
House Charities®
Northeastern Pennsylvania

Grant Application

Date: _____

Name of Organization: _____

Project Title: _____

Contact Person: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Mobile Phone: _____

Fax: _____ Email: _____

Organization Web Address: _____

Amount Requested: \$ _____

Date funds are needed by? _____

- **Please include a copy of your organization's latest audited financial statement and a letter from the IRS stating your exempt status.**

Are you working with a McDonald's representative on this grant? Yes – No (circle one)

McDonald's Contact: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Mobile Phone: _____

Email: _____

How were you informed of RMHC of NEPA?

Where is the closest McDonald's Restaurant to your organization?

Have you received a RMHC of Northeastern Pennsylvania grant in the past? Yes – No (circle one)

If so, please state the date and the amount rewarded: _____

Grant Application

Please answer the following questions on a separate sheet of paper. (One page maximum for each question)

I. HISTORY

Please provide us with a brief history of your organization, including the overall goals and purpose of your organization and a specific description of the needs or problems addressed.

II. TARGET POPULATION

Please summarize your target population in measurable terms (i.e. who the primary audience, how many will be served, how old are the participants, where the program can be offered, and the geographical range of the program or project for which there request is being made.) For example, your program helps 125 disabled children, ages 6-12 in Williamsport; or 1,000 high school seniors in Wilkes-Barre, etc. al.

III. SUMMARY

Please provide concise information on the program and how it will work, the specific purpose of the use of the funds, and how your objectives will be accomplished. What is unique or innovative about your program?

IV. BUDGET

Amount requested from Ronald McDonald House Charities of NEPA: \$ _____

Please attach an itemized budget:

- 1) For requested project
- 2) For your organization

- **Detail your current sources of income and expenses, and include a balance sheet from the past year. Provide plans for contributions from other institutions or organizations, if any, and your most recent funding report.**

V. EVALUATION

How will you determine the impact of this project? For example, through a survey of parents and children, an appraisal of physical improvements, attendance figures, etc. Please be specific. If the project is funded, a grant status report will be required 30 days after completion and / or one year after the grant is awarded. If you received grant funding from Ronald McDonald House Charities of NEPA in the past, it is mandatory that the Grant Closeout Report be turned in before a new application can be considered.

**RONALD McDONALD CHILDRENS CHARITIES
OF NORTHEASTERN PENNSYLVANIA, INC.**

Grant Application Checklist

- _____ Is the complete application packet submitted in triplicate?
- _____ Is the cover letter on your organization's letterhead?
- _____ Is it signed by a senior management official of the organization?
- _____ Do I have support from a McDonald's Restaurant Owner Operator?
- _____ Does my grant fall within the required guidelines of RMHC of NEPA?

DID YOU INCLUDE THE FOLLOWING ITEMS?

Three copies of:

- _____ The Grant Application Form
- _____ The Project Budget
- _____ The Organization's Budget
- _____ Statement of income and expenses
- _____ Balance Sheet
- _____ Income support and revenue sheet
- _____ The Organization's most recent audited financial
 Statement
- _____ Is a copy of the organizations current 501c3 form included in our grant packet?