



HINTON AREA FOUNDATION COMMUNITY IMPACT GRANT APPLICATION

APPLICATION DEADLINE: January 31

The Hinton Area Foundation makes discretionary and field-of-interest grants to charitable organizations in the areas of Education, the Arts, Beautification for the Hinton/Summers County area, Health and Human Services, Public Recreation, and Other eligible needs.

Before completing this application, please thoroughly read. Incomplete entries may not be considered. The applicant assumes responsibility for insuring HAF receives all requested information by the Application Deadline. HAF assumes no responsibility for procuring information. HAF requests a hardcopy for all applications. Hardcopies must be mailed to: Hinton Area Foundation Grants Committee, P.O. Box 217, Hinton, WV 25951.

APPLICANTS CONTACT INFORMATION

Full Name: _____ Title: _____
Street: _____ City: _____ State: _____ Zip: _____
Phone: _____ Mobile: _____ Email: _____

Organization: _____
Mailing Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ Mobile: _____ Email: _____

REQUEST

Give an outline of the purpose of what the grant will be used for:

Name: _____ Date: _____

GRANT SELECTION

Select the Grant for which you would like to apply.

- | | |
|--|--|
| <input type="checkbox"/> Education | <input type="checkbox"/> Health & Human Services |
| <input type="checkbox"/> The Arts | <input type="checkbox"/> Public Recreation |
| <input type="checkbox"/> Beautification for the Hinton/Summers County area | <input type="checkbox"/> Other (Please provide a description below:) |

AMOUNT OF REQUEST

1. Amount of Request \$ _____

HAF PARTICIPATION

How many HAF events have you attended in the previous year?
How many hours has your organization volunteered with HAF in the previous year?
If you received a grant in the previous year, what was the amount?
If you received a grant in the previous year, how many individuals were served in Summers County?

REPORTING REQUIREMENT

HAF requires that you submit a Status Report by October 1 to detail success of your project and how your success can be measured. An example report is attached. Failure to submit your report by the due date may impact your eligibility for future grants. Pictures are also appreciated!

TRUTH IN SUBMISSION STATEMENT

I hereby certify that the information set forth in this application is true to the best of my knowledge. Furthermore, I hereby grant permission to the Hinton Area Foundation or its representative to contact me for additional information if needed to review additional information concerning my grant request.

Name: _____ Date _____

Hinton Area Foundation Use Only

Date Application Received:	
Did requestor receive a grant in previous year (yes/no)?	
If yes, did requestor submit Status Report (yes/no)?	
Was Status Report received by Oct 1 (yes/no)?	



HINTON AREA FOUNDATION COMMUNITY IMPACT GRANT

STATUS REPORT

Due October 1

Submit to Grants@hintonareafoundation.org

The Hinton Area Foundation makes discretionary and field-of-interest grants to charitable organizations in the areas of Education, the Arts, Beautification for the Hinton/Summers County area, Health and Human Services, Public Recreation, and Other eligible needs.

HAF requires that Community Impact Grant Recipients submit a Status Report by October 1 to detail success of your project and how your success can be measured. Failure to submit your report by the due date may impact your eligibility for future grants. Pictures are also appreciated!

APPLICANTS CONTACT INFORMATION

Full Name: _____ Title: _____
Street: _____ City: _____ State: _____ Zip: _____
Phone: _____ Mobile: _____ Email: _____

Organization: _____
Mailing Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ Mobile: _____ Email: _____

Award Amount: _____ Number of people served by activity: _____ Age range: _____

Description of activity: _____

Activity Success Factors: Please describe the how you measure the success of your program. For example, if you provided all of your football players with a new uniform, that would be "100% success" with the measurement "Number of players that received a new uniform".

Success Factor: _____
Measurement: _____

Number of hours your group volunteered with HAF this year: _____ HAF Events Attended: _____

Please add any other relevant information: _____

Please include pictures with your application. *By providing these photos, you agree to HAF using them in our publications, including on the website or FaceBook. Thanks!*