



A 501c(3) non-profit organization

2020-2 Veteran Suicide Prevention Grant Program Application

Section 1: Organizational Information

Organization Name _____

Address _____

Phone Number _____

Website _____

Federal Tax ID # _____

Date of Award of 501(c)(3) _____

Point of Contact _____

Email _____

Phone Number _____

Section 2: Leadership

CEO or Executive Director _____

Email _____

Phone Number _____

Board of Directors/Advisors _____



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Section 3: Programs and Operations

Mission

Relevant Programs

Section 4: Grant Execution

Explain in detail exactly how any grant funds awarded will be spent. (NOTE: None of these grant funds can be used to pay staff or contractor salaries, fees, or labor costs.) It is our expectation that 100% of the grant will be spent on direct program execution.



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Who will be directly responsible for the expenditure and accounting of grant funds?

Name _____

Phone and email if not already listed in the application?

Section 5: Documentation

Provide at least three testimonials from Veterans and/or their families who have participated in your program(s). Each testimonial must include a legible signature and contact information.

Attach copy of IRS 501(c)3 award letter

Section 6: Support Material (Optional)

Provide any relevant support material you wish the Southwest Veterans Foundation Board of Directors to consider (brochures, awards, certifications, videos, media coverage etc.,) that will assist in determining the quality, quantity, effectiveness, and—most importantly, results and outcomes of your programs and operations. You need not duplicate anything that is on your website; we will do a thorough review of it.

Section 7: Certification

By signing and submitting this grant application, I certify the accuracy of all information we have provided and agree to submit a written report within 30 days of the use of any grant funds awarded providing the details and documentation of how the grant funds were spent, immediate results and outcomes, and additional results and outcomes expected as a result of these specific actions. A report format will be provided at the time that grants are awarded.

Signature _____
Date

Printed Name and Title