

NHSCOT FUND: Grant Application

Contact Name:	Phone:	
Organization:		
Registered 501c3: Yes: No	o: (If Yes, provide an IRS Tax-Exemption Letter)	
Mailing Address:		
City/Town:	State:Zip Code:	
Email:	Website:	
Event or Other Description:		
State purpose of grant request		
Requested Grant Amount up to \$3,	,000: \$	
Have you already applied for funds If yes, please attach your purpose f	for this Event in this calendar year from the NHSCOT FUND? \Box Yes \Box for this request.	□ №
List other grant sources to which yo	ou have applied:	
For Events:		
Location:		
How long has event been held?	Estimated number of event participants:	
For Other:		
Purchase or Rental?		
Δ written Final Report is required v	within 8 weeks after the close of the grant period describing how the ob-	niective

of the Grant/Scholarship were met.

NHSCOT FUND: Grant Application Form for Event

Page 2 of 2

Along with a completed grant application you MUST to provide the following:

Detailed Proposal, One-Page Summary, IRS Tax-Exemption Letter (if applicable), Board of Trustees List, Current Operating Budget and Detailed Event Budget. Additional information may be required on a case by case basis.

Once you have completed the application and attached all required or optional documentation, submit your complete application. Your complete application and all required documents MUST be received prior to the deadline in order for your application to be placed on the docket for review.

Please submit any additional material you feel would be helpful to NHSCOT FUND Committee in reviewing your application for a grant from the NHSCOT FUND.

	i		
М	ease	che	CK:

\square If for any reason the event addressed in this request for a grant from the NHSCOT FUND does not occur, I will immediately inform the NHSCOT FUND Committee and return any award I have received.				
Signature:	Date:			
Print Name:				

You may submit your proposal at any time, however, requests will be reviewed according to the schedule indicated below:

Postmarked byReviewed inFebruary 1stFebruaryMay 1stMayAugust 1stAugustNovember 1stNovember

Mail completed application to:

Chair, NHSCOT FUND Committee

25 Triangle Park Drive, Suite 4

Concord, NH 03301

OR

Email completed application and supplemental material to:

info@nhscot.org

with NHSCOT FUND in subject line.

Please direct any questions to: info@nhscot.org with NHSCOT FUND listed in the subject line.