

# Stillwater Community Foundation Grant Application

P.O. Box 425, Stillwater, OK 74076-0425 John Killam, President, 405-742-2904,  
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*Organization Name* \_\_\_\_\_

*Organization Phone Number* \_\_\_\_\_

*Organization Address* \_\_\_\_\_

*Organization Website* \_\_\_\_\_

*Contact Person Name* \_\_\_\_\_

*Contact Person Email* \_\_\_\_\_

*Contact Person Phone Number* \_\_\_\_\_

*Tax Identification Number* \_\_\_\_\_

**Project Name** (Name of Project)

**Project Description** (Please provide a description of the grant request)

**Amount Requested** (Please indicate the amount you are requesting from The Stillwater Community Foundation and the total cost of your project)

**Additional Funding Sources** (Please describe the other sources of funding for your project)

**Board Member Contribution** (Please indicate what percentage of your board makes financial contributions to your organization)