



**San Angelo Safari Club International
Program Grant Request Application**

This application must be completed in full. Incomplete applications will not be considered.

ORGANIZATION SUBMITTING: _____

PROGRAM/PROJECT TITLE: _____

TOTAL AMOUNT REQUESTED: \$ _____

DATE SUBMITTED: _____

Parameters For Project:

Attach the following:

1. Detailed Project Description
2. Cost Benefit Analysis
3. Return on Investment Analysis
4. Explanation of expected/intended results
5. Explanation of how project performance will be tracked and documented

Have we funded this project before? If yes, please list year and amount awarded, and attached final project reports for any previously awarded grants.

Year:	Amount:
_____	_____
_____	_____

- New Project
- Existing Project

Is funding for equipment? Yes No

Is funding for personnel? Yes No

Contact Name and Title: _____

- **Will you present to the SASCI Governing Body?**

- **If not, contact who will represent the request?** _____
- **Connection to SASCI Mission, i.e. litigation, marketing, legislative and voter education, and similar advocacy actions intended to protect the privilege of hunting and the hunting heritage:**

Registered Organization Name (Payee):

Address: _____

Phone: _____ **Email:** _____

Web Site: _____

EIN: _____ **IRS Section:** _____

Application Information:

1. **Project Budget** (Attach details, costs, quotes, etc. as applicable):

2. **Date Funding is Required:**

3. **Anticipated Start Date of Project:**

4. **Program/Project Description and Time Frame:**

5. **List Other Funding Sources Of This Project:**

6. **How Will The SASCI Be Recognized For Support?**

7. **Does The Grant Requestor Support SCI/SCI Foundation and Their Missions and Policies?**

Background information for external grant applicants only

8. Organization Mission Statement:

9. Brief Organization Summary:

Please return form with attachments to:

San Angelo Safari Club International
8137 US Hwy 87 North
San Angelo, TX 76901

Electronic Submissions to: Please contact Chris Wood,
woodwildlifestudio@gmail.com, at 325-226-3458 with any questions.

Office Use Only

TO BE COMPLETED BY SASCI GOVERNING BODY:

Date Approved: _____

Date Rejected: _____ Reason: _____

SCI Budget Year for Funding: _____

Follow-up Requirements: _____