



uswrf.org

United States Women's Rugby Foundation

GRANT APPLICATION

Individual

Organization

Before completing this application please read the description and criteria carefully. For additional information or clarity please contact USWRF at the address below. The application should not exceed 5 typewritten pages in twelve-point font with 'one and a half spacing' and one-inch margins. All applications must include a one page budget and timeline. **Please know if you exceed the page limit you will be disqualified from consideration.**

Name of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Organization (if applicable): \_\_\_\_\_

Role of Applicant (if part of organization): \_\_\_\_\_

Contact Address: \_\_\_\_\_

Telephone or Cell Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Rugby Club or Rugby Affiliation: \_\_\_\_\_

Territory: \_\_\_\_\_

Level of Participation (e.g., Territorial/National): \_\_\_\_\_

CIPP # (Individual, Team, or Coach): \_\_\_\_\_ Age: \_\_\_\_\_

***To my knowledge, all information supplied on this application is truthful. I understand that any discrepancies can cause the voidance of this application.***

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature (If under 18 years old): \_\_\_\_\_ Date: \_\_\_\_\_

Please list other funding sources previously sought/fundraising activities: \_\_\_\_\_

US Women's Rugby Foundation a 501(c)(3) Organization

1235-E #143 EAST BOULEVARD

CHARLOTTE, NC 28203

WWW.USWRF.ORG



[uswrf.org](http://uswrf.org)

Application:

Project Description:

- What is the title of your project?
- What individuals or populations will be served by your project? Please include approximate numbers of those served.

Project Summary:

- Please provide a 50-word summary of your proposed project/request.

Project Background:

- Explain the idea, problem, or circumstances.
- What do you hope to accomplish with the funding?
- What background work have you done that has prepared you to succeed?
- Specifically, what activities will you undertake with these funds (this should be linked to your timeline)
- What will result from your work?
- What do you anticipate the potential benefits and impact of your work?
- How will this grant support the USWRF's goals?

Budget

- Provide projected expenses (what USWRF will fund). Please do not tell us all your needs only what the USWRF funds will support.

Timeline and Action Plan.

- Highlight start dates and end dates as well as major activities

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**FOR OFFICIAL USE ONLY**

Reviewer: \_\_\_\_\_ Date: \_\_\_\_\_

Reviewer: \_\_\_\_\_ Date: \_\_\_\_\_

Reviewer: \_\_\_\_\_ Date: \_\_\_\_\_

Reviewer: \_\_\_\_\_ Date: \_\_\_\_\_

Approved/Denied: \_\_\_\_\_ Date: \_\_\_\_\_

Amount Approved: \_\_\_\_\_ Frequency: \_\_\_\_\_ Date: \_\_\_\_\_

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