

Pratt Northam Foundation  
PO Box 104  
Lowville, NY 13367

Application for Summer Recreation Program Funding

Applicant: \_\_\_\_\_

I. Applicant Information

1. Is the applicant organized as a nonprofit organization under state laws governing charitable organizations? Yes No

If yes, in what state or commonwealth? \_\_\_\_\_

If no, please explain \_\_\_\_\_  
\_\_\_\_\_

2. Has the applicant received a ruling or determination letter from the Internal Revenue Service about the following?

(a.) Exempt Status Yes No

(b.) Private Foundation Status Yes No

(c.) Municipal Body: Town, Village, County, etc. Yes No

*(Attach a copy of each such letter.)*

3. Is the applicant controlled by, related to, connected with or sponsored by another organization? Yes No

If yes, please attach a statement to this application identifying the organization, its purpose and activities and its relationship to the applicant.

4. Please attach a list with the name, address, and title of each member of the applicant's governing board.

5. Name the person who will be administering the recreation program. This is the person that will be receiving and dispensing the grant monies.

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Street Address)

\_\_\_\_\_  
(City, State, Zip Code)

\_\_\_\_\_  
(Area Code and Telephone #)

\_\_\_\_\_  
(E-Mail Address)

6. Has the applicant (or any organization listed in #4 above) ever applied for or received a grant from the Pratt Northam Foundation in the past? Yes No

II. Description of Recreation Program

1. Amount Requested: \_\_\_\_\_

2. Please attach **EACH** of the following to this application:

- (a.) If your organization had a summer recreation program in the last year, then include a *program report* being sure to describe the number and ages of young people served, the number of staff and volunteers and a description of the activities offered. Also, include a final financial report detailing revenues and expenses.
- (b.) A *budget for the upcoming program* detailing ALL projected sources of income and expenditures. Be sure that your request to Pratt Northam does NOT exceed 20% of the total cost of the program.
- (c.) A *description of the program activities for the upcoming summer*. Be sure to describe the activities that could not be provided without Pratt Northam funding. Include a projected number of young people to be served and if that number is significantly different from the number served in the previous summer, please explain. If your request to Pratt Northam exceeds \$5 per child served, please justify the request.

3. Contact information for Recreation Program Director:

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Street Address)

\_\_\_\_\_  
(City, State, Zip Code)

\_\_\_\_\_  
(Area Code and Telephone #)

\_\_\_\_\_  
(E-Mail Address)

Best day and time to visit, while the program is in session: \_\_\_\_\_

III. Certification

From my own knowledge, I state that the information given in Parts I and II is accurate. The applicant organization has authorized me to make this application.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Printed Name)

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Date)

III. (For Pratt Northam Use)

Date Approved \_\_\_\_\_

Amount \$ \_\_\_\_\_

Date of Award \_\_\_\_\_

President's Signature \_\_\_\_\_