

Applying for a VECustomers Share Grant ***Information to Help You in Completing Your Grant Application***

1. The VECustomers Share program is intended to support projects that benefit communities in the Volunteer Energy Cooperative service area. This program does not fund: 1) candidates for political office or any political purpose; 2) payment of electric bills or charges; 3) governmental schools or schools receiving public funds; or 4) religious organizations. The program, however, may fund projects specific to separate organizations from schools or religious organizations (PTOs or church youth groups, for example), if the VECustomers Share board deems that the benefit of the project will be felt community-wide.
2. VECustomers Share grants submitted by individuals will not be funded. Special needs for an individual may be considered if the grant is submitted by a qualifying organization. For example, if an individual's house burned, a community organization (civic club, etc.) could apply for a grant to assist the individual.
3. To ensure the best opportunity at having a grant funded:
 - Complete the applications fully and clearly.
 - List all other primary funding sources for the project. The VECustomers Share grants are designed to assist projects as a source of *supplemental* funding.
 - Include a detailed description of intended use of the funds.
 - If additional information is provided, attach **no more than 5 pages of information to the application**. If other supporting documentation is provided (brochures, photos, etc.) enclose an original copy with the application for each county you serve.
4. Grants are reviewed on a case-by-case basis. Applications may, at the discretion of the VECustomers Share board, be either fully funded, partially funded, declined, or the organization may be asked to resubmit, providing additional information.
5. VECustomers Share grants are reviewed by an independent board, made up of non-paid volunteers from VEC service areas. Neither members of the Volunteer Energy Cooperative Board of Directors nor employees of VEC serve on this board.
6. The VECustomers Share Board of Directors meets regularly based on the number of applications received (usually once a month, but no less than quarterly) to consider grant funding. Grant applications must be received at the VEC Corporate Office in Decatur not later than the last working day of the month to be considered at the next month's VECustomers Share Board meeting. When a grant application is received, the submitting organization will receive written notification of the date that their grant will be considered. All applicants will be sent a letter notifying them of the status of their funding within a few days after the board meeting.
7. Grant applications must be received at the VEC Corporate Office in Decatur not later than the last working day of the month to be considered at the next month's VECustomers Share Board meeting.

Current VECustomers Share Board Members

Bradley County, Harold Reno
Cumberland County, Holly Neal
Cumberland County, Jim Purcell
Fentress County, Jim Taylor
Hamilton County, Bobby Scott
McMinn County, Doug Ford
Meigs County, Gloria Schouggins
Pickett County, Galen Rector
Polk County, Bill Womac
Putnam County, Joyce A. Callahan
Rhea County, Donald 'Pete' Williams
Roane County, Alton Lingerfelt



P.O. Box 277
Decatur, TN 37322

APPLICATION FOR GRANT FOR ORGANIZATION/AGENCY

1. Name of Organization: _____

2. Location: _____

3. **Complete Mailing Address:** _____

City or Town

State

Zip Code

4. Phone Number: (_____) _____ (_____) _____

AREA CODE

Work

AREA CODE

Home

5. Contact Person: _____

PLEASE PRINT LEGIBLY

Name

Title

6. Has this organization received a VECustomers Share Grant in the last 12 months?
Yes ___ No ___ If yes, list dates and amounts of grants received.

7. Do members of this organization contribute to VECustomers Share by agreeing to have their VEC bills rounded up to the nearest dollar? Yes _____ No _____

8. Is this organization requesting funding exempt from payment of income tax:
Yes ___ No ___ If yes, a copy of Form 501(c) 3 from Internal Revenue Service must be attached

9. Primary Funding Agency of Organization

10. Please indicate which VEC counties that this organization serves:

___ Bledsoe ___ Bradley ___ Cumberland ___ Fentress ___ Hamilton
___ Loudon ___ McMinn ___ Meigs ___ Morgan ___ Overton
___ Pickett ___ Polk ___ Putnam ___ Rhea ___ Roane
___ Scott ___ White

11. Does organization provide service outside VEC service area?

Yes ____ No _____

If yes, please provide information on number served and location.

12. Purpose of Request: (Include amount requested and specifics of how funds will be used.)

13. **Estimated Total amount needed for project.** \$ _____

Totals from other funding sources (list sources)

_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____

TOTAL requested from VECustomers Share \$ _____

14. How is this program measured for effectiveness (i.e. records kept on number of families served, monetary benefits to families or community, lives changed, etc.)?

15. Please list three references from outside your organization that have knowledge of your programs and this request.

| | | | |
|---------|-------|-------|----------|
| Name | Phone | | |
| Address | City | State | Zip code |
| Name | Phone | | |
| Address | City | State | Zip code |
| Name | Phone | | |
| Address | City | State | Zip code |

The information contained in this statement is for the purpose of obtaining funding from VECustomers Share on behalf of the undersigned. Each undersigned understands that the information provided herein is used in deciding to grant funding, and each undersigned represents and warrants that the information provided is true and complete and the VECustomers Share Board of Directors may consider this statement as continuing to be true and correct until a written notice of change is provided. The VECustomers Share Board of Directors is authorized to make all inquires they deem necessary to verify the accuracy of the statements made herein.

NAME OF ORGANIZATION

SIGNATURE OF REPRESENTATIVE

TITLE

DATE

IMPORTANT NOTE: If additional information is provided with this application, attach no more than 5 pages of information to the application. If other supporting documentation is provided (brochures, photos, etc.) enclose 3 original copies with the application.