



**JOHN T. HOLMSTROM, JR.  
MEMORIAL GOLF FUND**  
*supporting golf's fine traditions*



Please complete application and return it to: Community Foundation of Northern Illinois,  
946 N. 2<sup>nd</sup> St, Rockford, IL 61107 by **April 7**. Please print neatly or type.

**Date of Application:** \_\_\_\_\_ **Date Funds are Needed:** \_\_\_\_\_

**Name of Organization:** \_\_\_\_\_  
(Should be same as on IRS determination letter)

**Year Founded:** \_\_\_\_\_ **Current Operating Budget: \$** \_\_\_\_\_

**Executive Director/President:** \_\_\_\_\_

**Contact Person/Title** (If different than above): \_\_\_\_\_

**Address:** \_\_\_\_\_

**City/State/Zip:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Fax Number:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Website:** \_\_\_\_\_

**Project Title:** \_\_\_\_\_

**Purpose of Grant:** \_\_\_\_\_

**Anticipated Project Dates:**      **From** \_\_\_\_\_      **To** \_\_\_\_\_

**Total Project Cost: \$** \_\_\_\_\_ **Amount Requested: \$** \_\_\_\_\_

**Number served by this program in the Greater Rockford Area:** \_\_\_\_\_

# PROJECT DESCRIPTION

Please include the following in your description where applicable:  
Purpose, locations, target population, substantiation of need, etc.

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How does the project promote character development?

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\_\_\_\_\_  
**Signature, Chairperson, Board of Directors**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Signature, Executive Director/President**

\_\_\_\_\_  
**Date**

**Attachments:**

- Current Federal IRS determination letter indicating non-profit status (First time applicants only)
- Mission Statement of Organization
- List of Board of Directors
- List the major outcomes that you hope to achieve through this program/project
- Budget of all income and expenses for the project using CFNIL's Budget Template for Grantseekers which can be found at <https://www.cfnil.org/grants/john-t-holmstrom-jr-memorial-golf-grant>