The Arrowhead grant was established in order to give back to the community and individuals in need of financial assistance to further their career goals. Our goal in awarding this grant to a local nonprofit is that you will use these funds to grow your nonprofit and continue to reach the goals you have set in place. Arrowhead Talent Solutions has made an impact in the community through our business ventures and now we want to make an impact through giving back and helping our community grow. We hope that as a non-profit you will take the time to fill out this application and look forward to reviewing your submission.

Applications are to be submitted to the Arrowhead grant committee by December 31st, 2024. All information submitted will be held in confidence and used solely for the purpose of deciding on nonprofit organizations to receive the grant money.

**Qualifications:**

-Must be a 501(c)3 nonprofit

-Must be located within Stark County

-Must have been established for 1+ years

**Instructions:**

1. Type nonprofit name on each page.
2. Type a summary of why your nonprofit is deserving of these funds and include it with your application as directed on page 5. You may also submit a video for the committee to review in replacement of a written summary.
3. Complete all information. Failure to do so may result in the committee not reviewing your application.
4. Winners must be available for the awards event date TBD where the grant will be distributed to winners. Failure to attend event will result in loss of funds.
5. Winners must use the money for intended purposes only.

For questions or concerns please contact Cecily Taylor, Arrowhead Marketing Manager

**Email:** Cecilytaylor@arrowheadtalentsolutions.com

**Phone:** 330-354-0772

#### Organization Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

##### **PERSONAL DATA**

Date \_\_\_\_\_\_\_\_\_\_

Organization

Main point of contact \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address

Street

City State ZIP

Telephone #

E-mail address

Date of establishment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EIN # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Classification \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#### Organization Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ORGANIZATION DETAILS**

Organization mission statement:

Who benefits directly from your organization?

What are some milestones you have achieved since your organization was established?

#### 

#### Organization Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**USE OF FUNDS**

Describe in depth how the funds will be used. The total must add up to the amount you are asking for

**AMOUNT REQUESTED (MAX $2500) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |
| --- | --- | --- |
| **AMOUNT** | **DESCRIPTION** | **TOTAL** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

Organization Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# ESSAY OR VIDEO SUBMISSION

The grant committee has been entrusted with the task of deciding which candidates will be awarded a grant.

On the next page please prepare your essay. This essay should be no longer than 2 pages. Please answer the following question within the essay:

Why is your organization deserving of funds? How will these funds help your foundation in a positive way?

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