Alabama Association of Rescue Squads Equipment / Education Grant Application

Grant Procedure: All Grant applications MUST be submitted to the AARS Executive Secretary 10 days prior to the First (1st) and Third (3rd) quarterly meetings. Applications will be referred to the Ways and Means Committee for screening. After screening, the Ways and Means Committee will return the applications to the Executive Board and make recommendations. The final approval of all Grants will be made by the Executive Board and approved by the AARS Board of Directors. Approved Grant Application(s) will be awarded and presented at the 3rd Quarterly Meeting and Annual Conference.

Grants Applications: All applications are to be approved collectively in an amount not exceeding 75% of the current fund balance. Any grant application exceeding \$ 5,000.00 will be approved on a matching basis ONLY. No grant(s) shall be approved for more than \$ 10,000.00. The matching amount, (Example, 50/50, 60/40, 80/20) will be determined by the AARS Executive Board.

Eligibility: Any current AARS Member Unit that is active and in good standing.

Frequency: Any unit that receives grant(s) in excess of \$ 10,000.00 within a 5 year period will not be eligible to apply again for 3 years.

If you are interested in applying for a grant, please complete the registration process by completing this Grant Application.

Organization Details: (1)	
Full Legal Organization Name:	
Street Address:	
Address Line 2:	
City, State:	
Postal / Zip Code:	
Telephone:	
E-Mail Address:	
Organizations Qualification: 501©3:	Yes No
Grant Category:	Education Training Equipment

<u>Authorization:</u> Attach a letter of Authorization or a copy of the minutes authorizing this Grant Application. Must be signed by Units Senior Officer, Chief / Captain, etc., and should be different from the Project Leader.

Grant Application: (2)

Organization Senior Officer:			
Name / Rank			
Phone:	E-M	ail	
Project Leader Information:			
First Name:		Last Name:	
Phone:		E-Mail:	
Proposal Request: (3)			
Program / Project Name:			
Requested Amount: \$			
Total Project Budget: \$			
Date Requested:		_	
Proposal Summary: (General descrip	ion (1-3 lines) of the use t	hat will be made of the funds requested).	
Organization Description / Historif grant is approved).	<u>/:</u> (Service provided by yo	ur agency and any additional services that may be added	

Background: (Should provide the reader with an explanation of the problem that has created the need for the program the will be funded by the requested grant.)
Project Description / Goals: (Should give the reader a detailed description of the program to be funded by the
requested grant and how your unit and / or community you serve will benefit if your application is approved. It should also
include what services you promise to deliver and to what population and any results you expect to bring about.)
Ways and Means Committee: Recommended: Denied: Chairman:
Grant Approved by Executive Board / Board of Directors: Yes 🗌 No 🗌
Date: President Signature: