SCI LIFE HUNTER ADVOCATE SOCIETY
PROGRAM GRANT REQUEST APPLICATION

This application must be completed in full. Incomplete applications will not be considered.

ORGANIZATION SUBMITTING: ____________________________________________

PROGRAM/PROJECT TITLE: _____________________________________________

TOTAL AMOUNT REQUESTED: $ ______________

DATE SUBMITTED: _____________________

Parameters For Project:

Attach the following:
1. Detailed Project Description
2. Cost Benefit Analysis
3. Return on Investment Analysis
4. Explanation of expected/intended results
5. Explanation of how project performance will be tracked and documented

Have we funded this project before? If yes, please list year and amount awarded, and attached final project reports for any previously awarded grants.

Year:        Amount:
            __________  
            __________  
            __________  
☐ New Project  
☐ Existing Project

Is funding for equipment?  ☐ Yes  ☐ No  
Is funding for personnel?  ☐ Yes  ☐ No

Contact Name and Title: _____________________________________________

• Will you present to the LHAS Governing Body? 
  __________________________

• If not, contact who will represent the request? _____________________

• Connection to LHAS Mission, i.e. litigation, marketing, legislative and voter education, and similar advocacy actions intended to protect the privilege of hunting and the hunting heritage:
  _______________________________________________________________

Registered Organization Name (Payee):
  _______________________________________________________________

Address: __________________________________________________________

Phone: _______________________ Email: ______________________________

Web Site: _________________________________________________________

EIN: ______________________   IRS Section: ___________________________

Application Information:

1. **PROJECT BUDGET** (Attach details, costs, quotes, etc. as applicable):

2. **DATE FUNDING IS REQUIRED:**
3. PROGRAM/PROJECT DESCRIPTION AND TIME FRAME:

4. LIST OTHER FUNDING SOURCES OF THIS PROJECT:

5. HOW WILL THE LHAS BE RECOGNIZED FOR SUPPORT?

6. DOES THE GRANT REQUESTOR SUPPORT SCI/SCI FOUNDATION AND THEIR MISSIONS AND POLICIES?

Background information for external grant applicants only

7. ORGANIZATION MISSION STATEMENT:

8. BRIEF ORGANIZATION SUMMARY:

9. CURRENT FINANCIAL INFORMATION: (Include tax-exempt letter and IRS Form 990 from most current fiscal year)
10. **CURRENT OPERATING BUDGET SUMMARY/YEAR TO DATE FINANCIAL STATEMENT:**

Please return form with attachments to:

Michael Roqueni  
LHAS  
4800 W. Gates Pass Road  
Tucson, AZ  85745-9490

Electronic Submissions to: Please contact Michael Roqueni, MRoqueni@safariclub.org, at (520) 620-1220 with any questions.

______________________________

TO BE COMPLETED BY LHAS GOVERNING BODY:

□ Date Approved: ____________________

□ Date Rejected: ____________________ Reason: __________________

SCI Budget Year for Funding: __________________________

Follow-up Requirements: ____________________________