

Applying for a SharingChange Grant
Information to Help You in Completing Your Grant Application

1. The SharingChange program is intended to support projects that benefit communities in the Middle Tennessee Electric Membership Corporation service area. This program does not fund candidates for political office or any political purpose, government entities, schools or their supporting organizations or expressly religious organizations.
2. SharingChange grant applications 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 application fully and clearly.
 - List all other primary funding sources for the project. SharingChange grants are designed to assist projects as a source of supplemental funding.
 - Include a detailed description of intended use of the funds. Funding for capital expenditures, ongoing expenses and salaries are not an approved use of funds.
 - Submit only one grant application per project.
4. Grants are reviewed on a case-by-case basis. Applications may, at the discretion of the SharingChange board, be either fully funded, partially funded, tabled until a future date, declined, or the organization may be asked to resubmit, providing additional information.
5. SharingChange grants are reviewed by an independent board, made up of non-paid volunteers from MTEMC service areas. Neither members of the MTEMC Board of Directors nor employees of MTEMC may serve on this board.
6. The SharingChange 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. 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.

Application Checklist ***Please do not staple pages together

- Completed application
- Receipts/Invoices of previous grant
- Copy of 501(C)(3) and letter of registration/exemption
- Current Form 990 or Financial Statement
- Itemized budget of proposal

For Office Use Only

Approved Yes No
Amount Paid: _____
Date Paid: _____
Category: _____

SharingChange, Inc.

555 New Salem Hwy
Murfreesboro, TN 37129

APPLICATION FOR ORGANIZATION/AGENCY

1. Name of Organization/Agency: _____ Federal ID #: _____
Street Address/Post Office Box: _____
City/Town: _____ State: _____ Zip Code: _____
Organization/Agency Email: _____ Phone: _____
Contact Person Name: _____ Title: _____
Contact Person Email: _____ Phone: _____

2. Have you previously received funds from Middle Tennessee Electric charitable organizations? Yes No

If yes, please list and include receipts/invoices of those expenditures:

<u>Date</u>	<u>Amount</u>	<u>Date</u>	<u>Amount</u>
_____	_____	_____	_____
_____	_____	_____	_____

3. Is your organization/agency exempt from payment of income tax: Yes No
If yes, a copy of form 501(c)(3) from Internal Revenue Service AND either a Form 990 or a Financial Statement must be attached.

Is your organization/agency registered with the State of Tennessee to solicit charitable donations or exempt according to the Charitable Solicitations Act? Yes Exempt
Please provide a copy of your letter of registration or exemption.

4. Primary funding agency of applicant. List source(s) from which you already receive revenue.

5. **Briefly describe purpose of request below and attach itemized budget to support the request.**

6. Estimated total amount needed for project: \$ _____
Totals from other funding sources: \$ _____
Total requested from SharingChange, Inc.: \$ _____

7. Is your organization/agency currently located in the MTEMC service area? Yes No

8. What is the total number of residents to be served in each county through this grant request?

Williamson County _____
Rutherford County*** _____ ***Please indicate number excluding city residents
Wilson County _____
Cannon County _____

9. Please share any other information you feel is important for the reviewers to know about your project.

10. Please list three references from outside your organization who have knowledge of your programs and this request. (Must not be a relative of applicant or member of the MTE SharingChange Board or employee of MTEMC.)

Name _____ Phone _____

Address _____ City _____ State _____ Zip _____

Name _____ Phone _____

Address _____ City _____ State _____ Zip _____

Name _____ Phone _____

Address _____ City _____ State _____ Zip _____

The information contained in this statement is for the purpose of obtaining funding from SharingChange, Inc. 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 SharingChange, Inc. Board of Directors may consider this statement as continuing to be true and correct until a written notice of change is provided. The SharingChange, Inc. Board of Directors is authorized to make all inquiries they deem necessary to verify the accuracy of the statements made herein. In addition, applicant agrees to the sharing of information provided herein with other organizations/agencies by SharingChange, Inc. Board of Directors.

Name of Organization/Agency _____

Signature of Representative _____

Title of Representative _____

Date _____

SharingChange, Inc. offers its programs to all eligible persons regardless of race, color, national origin, age, or disability, and no one shall be excluded from participation in, admission or access to, denied the benefits of, or otherwise be subjected to discrimination under any of this organization's programs or activities.