

# TV TROJAN FOUNDATION-TVSTRONG GRANT

_____	_____
(NAME OF FAMILY)	(CONTACT PERSON)
_____	
(ADDRESS, CITY, STATE, ZIP)	
_____	_____
(PHONE NUMBER)	(EMAIL OF CONTACT PERSON)

A REQUEST FOR A GRANT IN THE AMOUNT OF \$ \_\_\_\_\_ IS MADE FOR THE FOLLOWING PURPOSE:

- Hardships
- Medical Expenses
- Long Term Care Supports
- Mental Health Treatment
- Scholarship Funds
- Equipment Loss
- Income Loss
- Other: \_\_\_\_\_

\_\_\_\_\_

(Please explain the need)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

- Please pay my bills directly
- Please reimburse us directly

MAIL TO: TVSTRONG  
 TV TROJAN FOUNDATION  
 PO BOX 422  
 ZOAR, OHIO 44697

(SEE GRANT APPLICATION GUIDELINES FOR FURTHER INSTRUCTIONS)

\_\_\_\_\_ (NAME OF ACCEPTEE)

DATE: \_\_\_\_\_

## GRANT APPLICATION GUIDELINES

SUBMIT ORIGINAL APPLICATION PACKET TO THE PO BOX LISTED.

A NEW APPLICATION IS REQUIRED FOR EACH REQUEST.

APPLICATION PACKET SEQUENCE:

- 1.) Grant application -complete with signature
- 2.) Bills and/or receipts (after all sources of insurance have been billed; Medical, utilities, homeowners, etc).
- 3.) Copy of your most recent pay stub (**only if loss of income requested**)
- 4.) List any other funds you have received pertaining to this need. Please provide the name of the granting organization, date, amount received.
- 5.) List any outstanding applications for this request. Give specific details, including the amount of the request and the anticipated response date.
- 6.) List your efforts to fund this request through individual contributions and/or funds.
- 7.) Make copies of the information requested above and include them with the application. Mail to the PO BOX stated on application or email to [info@trojanfoundation.org](mailto:info@trojanfoundation.org)

***THE TV TROJAN FOUNDATION-TVSTRONG ACCEPTS GRANT APPLICATIONS ALL YEAR ROUND.***

***THE TV TROJAN FOUNDATION-TVSTRONG ONLY AWARDS TO FAMILIES OF THE TUSCARAWAS VALLEY SCHOOL DISTRICT.***

- A.) The Trojan Foundation board reserves the right to deliberate and approve or deny all grant applications.***
- B.) The use of personal financial information and records is to be used in grant distribution only, and not disclosed unless a government entity requires it to do so.***
- C.) We aim to protect personal information with as much privacy as possible, however as a 501 C-3 we must comply with certain government entities.***