



MVWC Service Project Large and Small Grant - Member Sponsorship Form

Print name of MVWC member _____

Preferred MVWC member contact information in case we need any additional information

Phone Email Other

Please answer the following questions, in the order asked, on a separate page and attach to this form.

1. Name the organization you are recommending, its contact name, its phone number and its email address.
2. What is your relationship with this organization?
3. How long have you known about or worked with this organization?
4. Why are you recommending this organization for a grant?
5. If this organization is awarded a grant, will you be involved in their project? If yes, in what way?
6. Please state any additional information you think we should know.
7. Do you know the estimated amount of the grant request? If so, please include.

Signature of MVWC member _____

Date _____

Thank you for your recommendation! We count on our members to identify organizations that are improving the quality of life in our community. After reviewing this recommendation and verifying it meets the grant requirements, we will send the organization a grant application. **Please return your completed Member Sponsorship Form for the Small Grant by February 15th and for the Large Grant by August 15th.** Any questions? Contact Sandi Kogan, Chair, mwvcserviceproject@gmail.com

Submit this form to:
MVWC Service Project
428 E. Thunderbird Road Box #539
Phoenix AZ 85022

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