

**SOROPTIMIST INTERNATIONAL OF OAK HARBOR  
COMMUNITY PROJECTS AND GRANT APPLICATION**



SOROPTIMIST  
Best for Women

Mail completed application and supporting documents to:  
SIOH: Attn Service Projects and Allocations PO Box 893 Oak Harbor WA 98277

**Supporting documents include:** Operating budget, and list of other project funders  
(name, amount and is funding pending or committed)

Organization: \_\_\_\_\_ Tax ID # \_\_\_\_\_

Contact Name & Title: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

Organization Mission and Purpose:

Project Title: \_\_\_\_\_

Requested Grant Amount: \_\_\_\_\_ Date Funds Needed: \_\_\_\_\_

Project description:

Project Start Date: \_\_\_\_\_ Project End Date: \_\_\_\_\_

Geographic area served by your organization: \_\_\_\_\_

Geographic area served by this project: \_\_\_\_\_

Number of people and gender benefitting from project:

\_\_\_\_\_

Have you previously received funding from Soroptimist International of Oak Harbor? \_\_\_\_\_

If yes, date(s) and amount(s) received: \_\_\_\_\_

If funded, how will your organization publicly acknowledge and report back to Soroptimist?