



FOUNDATION USE ONLY:	
Date application received:	
Amount approved:	
Date application approved:	
Notification made on:	

## EMERGING MARKETS GRANT APPLICATION

The Wisconsin Credit Union Foundation supports efforts to reach underserved communities in Wisconsin that struggle to be served by traditional financial services. Emerging Market grant dollars enable credit unions to implement programs and services to these markets.

Please note:

- For special events, credit unions or chapters will be reimbursed after the event is successfully completed and a written follow-up is received.
- Funds may not be used as a cash donation to a third party.

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### APPLICANT INFORMATION

Credit Union: \_\_\_\_\_ Chapter: \_\_\_\_\_

Credit Union CEO/President: \_\_\_\_\_

Asset Size: \_\_\_\_\_ Number of Members: \_\_\_\_\_ Number of Employees: \_\_\_\_\_

Purpose of Grant: \_\_\_\_\_

Contact Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ City, State & Zip: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Amount Requested: \_\_\_\_\_ Do you plan to move forward with this project  
even if you do not receive the total amount requested? \_\_\_\_\_ Total Project Budget: \_\_\_\_\_

If you receive a grant, how much (%) of the balance will be paid by the following:

Credit Union: \_\_\_\_\_ Chapter: \_\_\_\_\_ Other: \_\_\_\_\_

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\_\_\_\_\_  
Signature of President/CEO or Chairman of the Board

\_\_\_\_\_  
Date

*NOTE: Anything herein to the contrary notwithstanding, The Foundation reserves the right to require repayment of any scholarship or grant it awards should the credit union in question merge within a year following the date The Foundation Board takes action.*

*When completed print, sign and send the original with attachments to the following address. Please contact the Foundation with questions about this application form.*

**Wisconsin Credit Union Foundation, 1 East Main Street, Suite 101, Madison, WI 53703**  
**Email: [Foundation@TheLeague.coop](mailto:Foundation@TheLeague.coop)**  
**Phone 800-242-0833**



4. Include total estimated costs, projected budget, income sources, and list of other requests for funding, including those pending and those approved.

5. How will the project or program be maintained/supported at the conclusion of the funding cycle?