



## OKINAWA ENLISTED SPOUSES' CLUB

### OESC Charitable Funds Application Information

\*\*\* Please review this information before completing application\*\*\*

#### Applicants must agree to the following criteria:

- Organizations applying for funds must be willing to send a representative to attend our monthly meeting and/or monthly membership meeting (social) for questions and clarifications, if needed.
- The funds must be used as requested on the application. Any unused funds will be returned to the OESC.
- If the funds are no longer required for the purpose requested, the full amount of the donation must be returned to the OESC. FUNDS MAY NOT BE USED FOR AN ALTERNATIVE PURPOSE. Upon return of the funds; the organization may submit a new application for additional funds.
- If the donated amount exceeds the actual cost, the remaining funds must be returned to the OESC. A NEW APPLICATION MUST BE SUBMITTED REQUESTING TO USE THE FUNDS FOR AN ALTERNATIVE PURPOSE.
- Organizations must log volunteer hours with the Okinawa Enlisted Club Thrift Store to be eligible for future grant requests. A minimum of 10 volunteer hours per \$1,000 in funding will apply. I.e. 10 hours for applications requesting \$1,000 or less. 20 hours for those requesting \$2,000-2,999, 30 hours for those requesting \$3,000-3,999, 40 hours for \$4,000-\$4,999, and 50 hours for those requesting \$5,000. Your application will not be reviewed until your organization has fulfilled this commitment.

#### Grant Guidelines:

- OESC prioritizes items that have a long-term impact on an organization e.g., equipment or uniforms that can be used multiple times; tournaments that increase our athletes' ability to compete against competition non-existent in Okinawa; events that are not otherwise provided by the military or DoDDS system.
- OESC does not provide funding for only consumable items (food, drinks, etc) associated with a planned event.

#### Application Process and Deadline

- **Applications are due via e-mail to [oesc.charitable@gmail.com](mailto:oesc.charitable@gmail.com) by the close of business on the last Tuesday of each month.** Late applications will not be considered until the following month's meeting.
- Applications are considered at OESC's monthly board meetings.
- In the event that the organization must be contacted by OESC regarding clarification on their application, the organization must respond no later than three business days before the next board meeting. Failure to do so will result in pushing the request to the following month.
- An organization must have an organizational bank account to be eligible for funds. The payee cannot be an individual.
- The grant process can take 4-6 weeks. Therefore, when possible **organizations should submit their applications at least two months before funds are required.**

#### To be considered complete, an Application for Funds must be:

- Completed in full and signed by an authorized agent on behalf of the organization.



## OKINAWA ENLISTED SPOUSES' CLUB

Purpose: To promote high morale and to provide and foster interest among its members in social, cultural, recreational, educational and charitable activities.

### Application for Funds

For OESC use only

Discussion Date \_\_\_\_\_

Approved    Denied    Tabled

To: OESC Executive Board		Date:
From:		POC:
Address:		POC Phone #:
Subject of Request:		
Summary of Organization Goal and Purpose:		
Amount Requested:	Date Required:	Event Date:
Specific purpose for which the funds are needed:		
Have you received OESC funds for this event or other events in the past? If yes, please specify date(s) and amount(s):		
Have you applied for or received funds for this event from any other organizations? If yes, please specify date(s) and amount(s):		
What is the approximate total cost for this program or event? \$ _____ Detail below:		
Equipment:	Amount: \$	
Entry/Registration Fees:	Amount: \$	
Airfare:	Amount: \$	
Food/Meals:	Amount: \$	
Other:	Amount: \$	
Other:	Amount: \$	

Revenue currently available in support of this request: \$ _____
Are you or a voting member of your organization (or their spouse) a member of the OESC? If yes, please list their name:

**Please list fundraising activities you have performed in support of this event/function and any other sources you have requested, or plan to request, for funds and how much:**

Typically, OESC ***will not*** fund a project in full, nor will they provide funding for only food or meals associated with a planned event; applicants will need to pursue additional funding sources for those expenses.

1.	Amount Raised/Requested: \$ _____
2.	Amount Raised/Requested: \$ _____
3.	Amount Raised/Requested: \$ _____
Will the participants pay any of the costs for the program or event? If yes, how much?	
How many people will be impacted by this request?	
Please explain how your request will impact the community's quality of life. Give any other pertinent information that will aid the OESC in evaluating your request.	
<b>If approved, the funds check should be made payable to:</b> _____ <i>Note: We cannot make a check payable to an individual for squadron or unit functions; checks will have to be made payable to the respective booster clubs.</i>	

**I have read the information and instructions attached to this application form and agree to the conditions as stated. Furthermore, if funds are granted for this request, I will provide all RECEIPTS, INVOICES, any unused MONIES to the OESC Charitable Treasure no later than 30 days after the intended event date.**

**I understand that if the receipts are not provided or if the funds are not used for the purpose(s) other than stated above, the funds will be required to be refunded to the OESC and your organization may be banned from future donation requests at the discretion of the OESC Executive Board.**

**I understand that the OESC does not provide funding for only consumable items (food, drinks, etc) associated with a planned event.**

**I understand that once a request is approved, every effort will be made to donate the full amount. However, approval of a request is never a guarantee that the amount will be funded.**

**Please be advised that approval of funds may take SEVERAL weeks to process. Application without proper signature will NOT be processed. Your POC listed above will be contacted with the outcome of your funds request.**

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date



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**Private Organization Name**

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**Date**

**\*\*Applications must be submitted to the Okinawa Enlisted Spouses' Club (OESC) Charitable Treasurer at [OESC.Charitable@gmail.com](mailto:OESC.Charitable@gmail.com) before the last Tuesday of the month in order to be considered in the next month's OESC Executive Board Meeting.\*\***

Please initial that you have read and agree to each of the below statements:

\_\_\_\_ I have read the information and instructions attached to this funding request form and agree to the conditions as stated. Furthermore, if funds are granted for this request, I will submit written evidence of the project or event completion to the OESC including a brief synopsis as well as photographs to show where the funds were used (releasing the OESC to use the photos).

\_\_\_\_ Receipts must be submitted within 30 days of completion of the funded project or activity. If receipts are not provided as requested, subsequent applications from your PO will NOT be considered for 3 years from the date of the event.

I will ensure that our organization fulfills the commitment of required OESC Thrift Store volunteer hours necessary to be eligible for future grant applications.

\_\_\_\_ If OESC funds are granted for this request, I understand that upon completion of the project or activity for which OESC funds are received, any unused OESC funds MUST be returned to OESC. All checks must be made payable to Okinawa Enlisted Spouses' Club.

\_\_\_\_ If a check is not cashed within 3 months of its issue date, it will be considered expired and OESC will not reissue any additional checks.

\_\_\_\_ I have disclosed if myself or any board member of our PO, or their spouses, are OESC members or Thrift Store Employees (This does not disqualify your PO!).

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Printed Name

Signature

Date