SAN DIEGO YOUTH FOOTBALL FUND

APPLICATION FOR GRANT REQUEST

Application Criteria and Instructions:

- Sufficient need or merit must be demonstrated.
- Completed applications must be submitted by mail to the San Diego Youth Football Fund, at the address at the bottom of this document.

Section 1: Applicant Information

Name:	
Address:	
City/State/Zip:	
Name(s) of Parents:	
Evening Telephone:	
E-mail Address:	
Affiliation (Youth Program) or School Attending:	

Section 2: Grant Information

Please describe situation for which Applicant is requesting a Grant. Discuss purpose of Grant and expected results. Include as much detail as you feel is necessary and attach any supporting documentation (e.g. medical bills, newspaper articles, etc.)

Eligibility:	circle one	PLAYEF	COACH	OFFICIAL	OTHER
Level:	circle one	POP WARNER	AMERICAN YOUTH	HIGH SCHOOL	OTHER

How has the Applicant been involved in the San Diego football community and in what capacity (e.g. official, player, coach, other, etc)

Section 2: Grant Information, continued

Is there a specific amount that you are requesting? If so, how much? \$_____

Please list two references that will submit written letters of reference and may be contacted for additional information about the Applicant's situation and financial need:

Name:	Relationship:
Address:	Telephone:

Name:	Relationship:
Address:	Telephone:

Additional Comments that support the Applicant's request for a Grant.

Section 3: Terms and Conditions

In applying for the Grant request, the Applicant acknowledges the following:

- The information submitted in this Application is complete and accurate to the best of the Applicant's knowledge.
- The Applicant understands that this form is only an application and does not guarantee that the SDYFF will provide a grant.
- The Applicant agrees to allow his/her name to be used by the SDYFF in association with the requested grant.

Signature of Applicant:	Date:
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Mail applications to:

San Diego Youth Football Fund 928 Springwood Lane, Encinitas CA 92024, USA