



Section 4: Grant Recommendation Form

Complete a copy of this form after each site visit. Once your decisions have been made, you must return all completed forms to the Community Foundation, including the organizations you visited but decided not to support.

School Name and Contact _____

Name of Organization _____

Address: _____

Phone Number: _____

Registered Charity Number: _____

Name of contact person at organization: _____

Date of site visit: _____

Participants in site visit: _____

Amount to be granted or DECLINE: _____

Description of grant (reason for decline):

Any other information about your site visit or the organization that you would like to share:

