



Music begins where the possibilities of language end'

Jean Sibelius

Ross Maki Memorial Fund

Grant Application Form

To apply for funding from the Ross Maki Memorial Fund, please complete this application. Please keep a copy of the application and submit via email to brucemaki44@gmail.com.

Section 1: Personal Information

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

EMAIL: _____ PHONE #: _____

STUDENTS NAME (if applicable) _____

EIN# (If non-profit organization) _____

Section 2: Purpose

Describe how this grant will assist you or your organization's musical endeavor:

Section 3: Disclaimer and Signature

I certify that my funding application answers are true and complete to the best of my knowledge, If this application leads to a grant, I understand that false or misleading information uncovered in my application may result in my having to make restitution.

Applicant's Signature: _____ Date: _____

Section 4: Funding qualifications

NOTE: In general the fund provides monetary assistance to individuals to assist with music education (Such as but not limited to music lessons, summer camps, classroom instruction), repair and purchase of musical instruments, and for general assistance to IRS recognized not-for-profit musical organizations. Other requests in keeping with the purpose of the fund may be submitted for consideration. Funding varies year to year. The Funds intention is to help several applicants each year.

1. Applicants must be from the general Mid-Michigan Area with a preference for those students and organizations within Gratiot County, Michigan.
2. Funding recipients may be of any age but the application must be completed by an adult.
3. Funding checks are not issued to the applicant. Please include the name, address, email, and phone number of the organization, business, or teacher that will be receiving the funds.
4. Should funds not be available, please consider applying the following calendar year.

Section 5: Funds Recipient Organization or Teacher Contact Information:

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

EMAIL: _____ PHONE #: _____