

PEDIGREE Essential Support Dogs: PEDIGREE Foundation Safety Net Program Grant Application

PEDIGREE Foundation will select ten recipients of the Essential Support Dogs: Safety Net Grants. Shelters and rescue organizations will be selected based on how their programs meet the criteria of keeping people and pets together and how they will support pet parents who are in need of emergency assistance. We will also take into consideration communities with high pet ownership that are experiencing severe financial hardship, as represented by public data such as unemployment rates.

To be considered for an Essential Support Dogs Safety Net program grant, please ensure your organization meets the following criteria:

- A.** Is able to respond to phone calls or e-mails from pet owners needing support
- B.** Has staffing or volunteers dedicated to program
- C.** Focus primarily on dogs with families needing
 1. Temporary boarding or fostering of pet
 2. Food to feed pet
 3. Pet friendly housing deposits
- D.** Willingness to share success stories (pictures, video, social, etc.)

To apply for an Essential Support Dogs Safety Net Grant, please submit the following:

- I.** Completed Grant Application Form (on following pages)
- II.** IRS 501(c)(3) Determination Letter
- III.** Two years of 990 forms (most current)
- IV.** Federation Tax ID/Employer Identification Number (EIN)
- V.** Narrative (general information about your organization, your mission, your programs, etc.)
- VI.** Program budget (detail how the funds would be used)
- VII.** Estimated timeline for utilizing grant funds and how you will evaluate success of your program.

Optional additional information:

- I.** Current organization's budget
- II.** References from organizations with whom you collaborate or have firsthand knowledge of your organization.

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Date of Application: _____

If awarded a grant previously by Pedigree Foundation, amount of last award: _____

Organization Name: _____

Contact Person and Title: _____

Head of Organization and Title: _____

Physical Address: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Main Organization Phone Number: _____

Contact Person Phone Number: _____

Email Address: _____

Website Address: _____

Project Name: _____

Number of pets Impacted and/or number of pets your organization expects to help this year:

Number of pets helped by this funding: _____

List the states and counties reached by this funding:

Amount Requested: \$10,000

Questions: Please contact info@pedigreefoundation.org or call (615-807-4194/629-519-6263).

