Operation Round Up
Grant Application

Operation Round Up (ORU) is a voluntary program that is CHELCO member-funded. Participating members round-up their monthly bills and give that change to the ORU fund. CHELCO uses 100% of these donations for this program and does not impose any overhead or administrative costs. Every penny donated goes back to our community.

What organizations and services are eligible? Applying organizations should have a 501 (c)(3) designation and serve communities in Walton, northern Okaloosa and Bluewater Bay, Western Holmes, and/or northeastern Santa Rosa Counties. Causes may include direct donation or event sponsorships benefiting, among others, educational and environmental programs, public health and safety, basic human needs, cultural events, arts, community service and programs supporting children at risk.

What does not qualify for funding? CHELCO's donation policy set by its board of trustees does not allow ORU funds to support political parties, campaigns, candidates or any referendum or other ballot issues and will generally not be made to churches or religious organizations, for-profit organizations, fundraisers to benefit an individual. CHELCO will not donate to school sports and youth sports programs due to the large number of such organizations in our community.

Submit application online at CHELCO.com/operation-round, or email to communications@chelco.com or mail to:

CHELCO
Attn: Community Affairs
1350 Baldwin Avenue
P.O. Box 512
DeFuniak Springs, FL 32435

Application Checklist – this lists documents and information that is needed to complete your grant request.

- ❑ IRS 501 (c)(3) letter
- ❑ W9 (upon grant award and only if this is for the first CHELCO donation received by the organization)
- ❑ Program description
- ❑ Projected budget for program
- ❑ Statistics, by county, of individuals served by the program
- ❑ Program goals and objectives
- ❑ Explanation of how funds will be used
- ❑ Description of how your organization measures effectiveness of the program
- ❑ Any additional information

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Application Date:

Name of organization:

Physical and mailing addresses:

Name and title of contact person:

Phone:

Email:

Website:

Amount requested:

Is this grant time sensitive, if so, please give date needed:

Please describe the program (may submit additional pages as needed):

What is the total budget or fund-raising goal for this program?

Which counties/areas does your organization serve? Please provide data showing numbers of clients/individuals who may benefit.

- ❑ Walton _____
- ❑ North Okaloosa _____
- ❑ Bluewater Bay _____
- ❑ East Santa Rosa county_____
- ❑ West Holmes _____

Please describe the program/event's goals and objectives. (Submit additional pages as needed)

Please explain how funds will be used. (Submit additional pages as needed)

Please explain how you'll measure the outcomes of the program/event. (Submit additional pages as needed)