

# SMILE-Single Mom's Inspire Love Everywhere

## GRANT APPLICATION

*Disclaimer: Submitting an application does not guarantee selection or award of the grant. SMILE-Single Mom's Inspire Love Everywhere reserves the sole and absolute discretion to determine whether to select a recipient and is not obligated to award the grant to any applicant.*

**SMILE will treat all information contained herein and submitted as private and confidential.**

### Application information

Please note some form of identification will need to be provided for you and your child(ren). (i.e. driver's license, ID card, birth certificate)

Full name:	_____	Date:	_____
	<i>Last First M.I.</i>		
Address:	_____	Phone:	_____
	<i>Street address Apt/Unit #</i>		
	_____	Email:	_____
	<i>City State Zip Code</i>		

Number of Children:	_____	Ages:	_____	Desired grant	\$	_____
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Use of grant money	_____
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*Please note that grants cannot exceed \$500 and are limited to once a year.*

Are you a citizen of the United States?	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
If no, are you authorized to work in the U.S.?	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Have you ever been convicted of a felony?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, explain?	_____

### Background

Tell us about yourself and why you are seeking a grant. (i.e. car payment, rent, utility bill)

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## References

Please provide three personal or professional references.

Full name:	_____	Relationship:	_____
Phone:	_____	Email:	_____
Full name:	_____	Relationship:	_____
Phone:	_____	Email:	_____
Full name:	_____	Relationship:	_____
Phone:	_____	Email:	_____

## Employment or Source of Income

*Please note a paystub, bank statement and/or proof of income will need to be provided.*

Company:	_____	Phone:	_____		
Address:	_____	Supervisor:	_____		
Job title:	_____	From:	_____	To:	_____
Responsibilities:	_____				
May we contact your supervisor for verification?	Yes <input type="checkbox"/>	No <input type="checkbox"/>			
Current Salary	_____		_____		

## Disclaimer and signature

I understand that applying does not guarantee selection or award of the grant. I understand that **SMILE-Single Moms Inspire Love Everywhere** reserves the sole and absolute discretion to determine whether to select me as a recipient and is not obligated to award the grant to any applicant. I further consent and provide full permission to **SMILE-Single Moms Inspire Love Everywhere** to contact my references, review my financial & employment data, and children's identification documents that are freely submitted by me.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please submit completed application and all documentation securely to [smilebigtodaymom2026@gmail.com](mailto:smilebigtodaymom2026@gmail.com). At the bottom of your email click the lock icon to create the confidential mode OR send password-protected documents. NEVER send your social security number.