

THE SELECTIVE INSURANCE



GROUP FOUNDATION®

At Selective, we believe being a good corporate citizen includes making a positive impact on society by contributing resources to benefit the public. The Selective Insurance Group Foundation was established to reach out and support the many organizations that are making a difference in people's lives in our communities.

Mission:

The Selective Insurance Group Foundation offers grants to not-for-profit, 501(c)(3) organizations in the communities in which we serve and operate that provide health and human services, promote civic responsibility and support home, auto and business safety.

Funding Guidelines:

The Selective Insurance Group Foundation will prioritize grant applications by proximity to our business concentrations, employee or agency involvement, societal contribution and through other considerations as deemed appropriate by The Selective Insurance Group Foundation Board of Directors or President.

Consistent with its mission, The Selective Insurance Group Foundation generally will not fund:

- Religious organizations or activities
- International programs
- Individuals
- State or Federal agencies
- Organizations that exclude types of people
- Arts and entertainment
- Political organizations
- Animal organizations

Application Process:

All requests for contributions must be submitted through the current application process. No verbal requests will be accepted. All applications should be directed to The Selective Insurance Group Foundation administrator. No one other than the Board of Directors or authorized officers of the Selective Insurance Group Foundation may commit to contributing foundation funds to an applicant.

Advertising and Sponsorships:

The Selective Insurance Group Foundation cannot fund advertising or sponsorship requests.



In order for The Selective Insurance Group Foundation to consider your request for contribution, please provide the following information to comply with the Internal Revenue Code substantiation requirements for charitable contributions.

Please supply all information requested in this application. Incomplete forms will not be considered. A completed form does not guarantee approval of the requested contribution. All requests for contributions are subject to review and approval. An application must be completed with every request for funding.

Today's Date: _____

Name of charity: _____

Contact person at charity: _____

Address: _____

Phone number: _____ Fax number: _____

e-Mail address: _____

Donation amount requested: _____

Have you applied for a contribution from any Selective Insurance Group, Inc. entity in the past 12 months: _____

PLEASE NOTE: Applications will not be accepted without a copy of your organization's 501(c)(3) determination letter from the Federal IRS.

EIN #: _____

If the organization is registered under a different name, please provide the actual name under which its tax-exempt status may be verified: _____

A brief description of the organization's mission and role of the requestor in that organization:

Please be advised that it is the intent of The Selective Insurance Group Foundation to make a donation to your organization for which we cannot accept any form of benefit (i.e. goods or services.) On the line below, please include a written acknowledgement that you understand our charitable intentions.

Please e-mail, fax or mail your application to the address listed below.