



GRANT APPLICATION FORM

Legal Name of Organization:

Mailing Address:

Phone:

Fax:

EIN:

Website:

Organization Email Address:

Name of CEO or Executive Director:

Phone:

Email:

Application Contact & Title (if *not* the CEO or Executive Director):

Phone:

Email:

Organization Information

Year Founded:

Tax Exemption Status: 501(c)(3)

Tax Exempt Number:

Mission Statement:

Geographic Area Served:



Grant Request Information

Amount of Request: \$

Name of Program or Project:

Describe what the grant will be used for:

Financial Information

Organization's Current Budget for Fiscal Year Ending:

Income: Expenses:

Program or Project Budget: Dates: from: to:

Income: Expenses:

Other Sources of Program or Project Funding:

Income:

Attached Supporting Information:

- Proof of 501(c)(3)
- Current 990
- Project Brochure

By signing below, I certify that the information contained in this application is true and correct to the best of my knowledge.

NAME: _____

DATE: _____