

GRANT APPLICATION

DATE:

CONTACT:

ORGANIZATION NAME:

ADDRESS:

PHONE #/E-MAIL:

DESCRIPTION AND AMOUNT REQUESTED:

TYPE OF REQUEST:	GENERAL SUPPORT	PROJECT SUPPORT	
		CAPITAL EXPENDITURES	
	TECHNICAL ASSISTANCE	OTHER	
PREVIOUS FUNDING FROM FOUNDATION: YES NO			
PLEASE CHECK ITEMS INCLUDED WITH REQUEST:			
COMPLETE BUDGET FOR THE PROJECT OR PROGRAM			
CURRENT ANNUAL OPERATING BUDGET			
CURRENT BOARD OF DIRECTORS			
CURRENT AUDITED FINANCIAL REPORT			
IRS 501 (c)(3) DETERMINATION LETTER			