



THOMAS E. QUADE FOUNDATION GRANT APPLICATION

cspurgeon@thomasequadefoundation.org

Name of your organization: _____

Address and contact information: _____

Website: _____

How long have you been a 501©(3)? _____

Are you based in Maryland? Yes _____ No _____

Do you have a physical location? Yes _____ No _____

Are you government funded? Yes _____ No _____

From where do you receive money or donations? _____

What is the average number of animals in your facility at one time? _____

Are you a foster based shelter? Yes _____ No _____

Do you take in medical cases? Yes _____ No _____

Do you have a medical fund? Yes _____ No _____

Are you open admission? Yes _____ No _____

Do you pay for any necessary medical treatment/surgeries before pets are adopted?

Yes _____ No _____

What is the percentage of paid employees and volunteers? _____

Essay: Describe your most crucial needs for the shelter and what ways you would use the grant money to better the environment and shelter experience for your animals.