

## **GRANT APPLICATION**

# **GENERAL INFORMATION** Organization (legal name): Address: Program Title: Contact Person and Title: Phone: Email: Web site: \_\_\_\_\_ INFORMATION ABOUT THE REQUEST Amount requested: \$ Time period covered by grant: From: \_\_\_\_\_ To: \_\_\_\_ month/year month/year ORGANIZATIONAL INFORMATION Organization's EIN: Date organization was founded: \_\_\_\_\_ # Paid Staff: Full time Part-time # Board members # Volunteers FINANCIAL INFORMATION Total expenses budgeted for the program: \$\_\_\_\_\_ Amount raised for the program to date: \$ Total income of organization (most recent fiscal year): \$ Total expenses of organization (most recent fiscal year): \$



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#### PLEASE ATTACH:

- A proposal that includes the following:
  - o The mission and an overview of the Organization's programs
  - o A description of the program you are seeking funding for, including:
    - Overview and Purpose
      - Description of the problem to be addressed
      - Justification of need and expected impact on the community
      - Constituent group to be served
      - Project goals (short, intermediate, and long-term)
    - Methodology
      - Program's principal personnel and their qualifications
      - Implementation plan to achieve each program goal
    - Evaluation/Monitoring:

time applicants or for changes to entity status)

- Plans for evaluating program results
- Measurable objectives to determine the outcome of the program and stated goals (short, intermediate, and long-term)
- Support
  - Ongoing need for sustaining project each year after grant period and plan for securing such funding
- Partners in the community working on the same issues, and efforts to coordinate with them to achieve goals of the program.

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List of other funding sources for this program, showing anticipated amounts funded
The Organization's most recent financial statements (audited report preferred), to include: <ul> <li>Current operating budget;</li> <li>Income and expense sheet;</li> <li>Balance sheet; and</li> <li>Most recent Form 990.</li> </ul>
List of board members, including title and business affiliation for each person.
List of names and titles of those responsible for the administration and expenditure of the grant funds.

☐ A copy of the IRS letter determining 501(c)(3) nonprofit status (only required for first



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If the application is approved, the Organization agrees to provide Grandon Charitable Foundation ("the Foundation") with the following, at the request of the Foundation:

overall contrib	An annual written report presenting the organization's purposes, descriptions overall programs, activities and accomplishments; eligibility to receive deductible contributions; information relating to the financial activities and financial position.			
positio □ Semia	<ul> <li>Annual financial statements presenting the overall financial activities and financial position of the organization.</li> <li>Semiannual and a final report describing the activities of the organization and the specific funded program, evaluation of objectives accomplished, actual income</li> </ul>			
and ex efforts	<ul> <li>and expenditures compared to the budget of the funded program, and success of efforts to solicit future funding.</li> <li>Other reports and information specified in the Agreement between the</li> </ul>			
		specific terms and conditions of the grant.		
Please note that failure to provide the above information in a timely manner as requested by the Foundation may result in cancellation of the grant.				
I hereby certify that the foregoing information is true to the best of my knowledge, information and belief.				
Signature	<del></del>	Signature		
Title		Title		
Date	<del></del>	Date		

Send the completed application and required attachments to Andrea Orth at <u>aorth@grandoncf.org</u>. After submitting, you will receive a confirmation email shortly thereafter.

\*\*Please Note that your application will not be considered by the Foundation for funding unless all sections are complete and it has been received by the Foundation at the above email address.