

Helmut and Carmen Weisser Foundation, Inc Grant Application

Organizational Information

Applicants considered shall be for organizations that serve Craven, Pitt, Jones, Pamlico, Beaufort, Lenoir and Carteret Counties only.

Organization Name:
Project/Program Name that will be supported by Grant Funding:
Grant Proposal
Summary of Program/Activity that will be supported by Grant Funding:
(please provide a detailed summary of community need, a timetable of what will be supported if the grant is awarded, anticipated number of people affected by the grant, if the program/activity is ongoing or specific date):

Goals of the Program/Activity				
Goal		Timeline		
1				
2				
3				
Grant Funding				
Specific Amount of Grant Funding being Requested:		\$		
Anticipated total budget of funding for the Program/Activity:		\$		
Total cost (or percentage) of requested Grant Funding of which will go to		\$		
support purpose of the Program/Activity: Operational/Administrative expenses:		% %		
operational/Mainimistrative expenses.		100%		
If you need to submit more information regarding budget information please provide on				
Local Counties that will benefit from Grant Funding of this Program/Activity:				
Have you requested funding from the Helmut and Carmen Weisser Foundation Inc prior: Yes / No If Yes, please pro		ovide a date:		
Carmen Weisser Foundation me prior.	li res, preuse pro	vide a date.		
	If Yes, was it also	to support the above		
	program/activity	7: Yes / No		
Other pledges from ding (exceptional services financial s	ammitmants to d	lata anacifia to thia		
Other pledges/funding/organizational sources financial commitments to date specific to this program/activity:				
Organizational Names	Financial Co	ommitment/Funds		
	\$			
	\$			
	\$			
	1			

Is your organization subsidized by a 3 rd party?	Yes or No If Yes please list:		
How many paid employees are in your organization	?		
<u>Contact Information</u>			
Name:			
Affiliation/Title to above listed Organization (Board	d Member, volunteer):		
Phone Number: Al	Alt Phone/Cell:		
Address:			
Email:			
Website:			
Names of Social Media Pages associated to Organiz	ation:		
Printed Name of Person Completing this document	<u>:</u>		
Signature:	Date:		
<u>PREFERRED</u> method for Grant applications/propo submission through our website at: <u>Weisserfoundation.org</u>	sals can be submitted via electronic		
As well as mailed to the following: Helmut and Carmen Weisser Foundation, Inc. 115 Anchor Way New Bern, NC 28562			
All grant applications/proposals will be accounted all	throughout the year but will be		

All grant applications/proposals will be accepted all throughout the year, but will be decided/awarded bi-annually. **Deadlines for grant applications must be received by February 1, and August 1.** Once all applications are reviewed by the board members, grants will be awarded/declined in the following 1-2 months.

Internal remarks use only

Approve

Needs further review