



## **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):

|  |
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|  |
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**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: | \$<br>%                         |
| Operational/Administrative expenses:   | %<br><hr style="width: 100%;"/> |
|  | 100%                            |

If you need to submit more information regarding budget information please provide on a separate document

|   |
|---|
| 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<br>If Yes, please provide a date:                          |
|   | If Yes, was it also to support the above program/activity: Yes / No |

Other pledges/funding/organizational sources financial commitments to date specific to this program/activity:

| Organizational Names | Financial Commitment/Funds |
|----------------------|----------------------------|
|                      | \$                         |
|                      | \$                         |
|                      | \$                         |

|   |                                  |
|---|----------------------------------|
| Is your organization subsidized by a 3 <sup>rd</sup> party? | Yes or No<br>If Yes please list: |
| How many paid employees are in your organization?           |                                  |

**Contact Information**

|   |                 |
|---|-----------------|
| Name:   |                 |
| Affiliation/Title to above listed Organization (Board Member, volunteer): |                 |
| Phone Number:   | Alt Phone/Cell: |
| Address:  |                 |
| Email:  |                 |
| Website:  |                 |
| Names of Social Media Pages associated to Organization:                   |                 |

|  |
|--|
| Printed Name of Person Completing this document: |
|--|

|            |       |
|------------|-------|
| Signature: | Date: |
|------------|-------|

Grant applications/proposals can be submitted via electronic submission through our website at: [Weisserfoundation.org](http://Weisserfoundation.org)

As well as mailed to the following:  
 Helmut and Carmen Weisser Foundation, Inc.  
 P.O. Box 13153  
 New Bern, NC 28561

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 September 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 <input type="checkbox"/> Needs further review |