The Sunrise Optimist Foundation of Freehold, New Jersey

P.O. Box 351, Adelphia, New Jersey 07710 732-637-9616 info@sunriseoptimistcluboffreehold.com

Thank you for your interest in the Sunrise Optimist Foundation of Freehold, NJ. Enclosed please find an application form.

In order to have your organization qualify for a community service grant from the Sunrise Optimist Foundation of Freehold, NJ it is necessary that the enclosed application be truthfully and accurately completed and all requested information be supplied. The completion of this application form provides us with critical information necessary for us to review your grant application.

The completion of this application and the providing of all requested information does not guarantee that your grant application will be approved by the Sunrise Optimist Foundation of Freehold, NJ.

SUNRISE OPTIMIST FOUNDATION OF FREEHOLD, NJ

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Community Service Fact finder

No grant will be awarded for the funding of general operations or administrative expenses.

101 Barkalow Avenue, Suite C Freehold, New Jersey 07728-2076

If your organization has been the recipient of previous grant(s) from the Sunrise Optimist Club or the Sunrise Optimist Foundation, please provide documentation that the funds were expended for the purpose for which they were approved.

Name of Organization	on			
Address				
Phone	E-mail	Website_		
Organization contact	t person			
Phone ()	Email: _			Amount
Requested \$	Dates fur	nds are to be used: From	to	
Project financial goa	1 \$	Amount raised to date	e \$	
Are matching funds	available? Yes No If so	o, match amount available a	nd match ratio (ex. 1:1) \$	
If so, what/who is the	e source?			
Description of project	ct (Use additional pages	if necessary)		
Total number of peo	ple to be served	Number kids to be	served	
Geographic area serv	ved (city, state, country)		Non-profit status 501c	
Has your organization	on been recommended by	y a Sunrise Optimist membe	er? Yes No	
If yes, please enter n	ame			
Please include the fo	llowing information on	a separate sheet of paper and	d attach to the application:	
benefit from this pro	ject, estimated useful lif	e of project, itemized expen	ls of implementation, how individues and equipment costs (budgeted lease estimate administrative cost	d expenses). Please
Direct any questions below mailing addre		The Sunrise Optimist Found	lation Community Service Grant	Committee at the
Mail or the complete	ed Grant application to:			
-	undation of Freehold, NJ o and Associates P.C.	ſ		