Irvine Christian Foundation

Grant Application

Use this form. All information must be provided. Incomplete requests cannot be considered.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Legal Name of Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name and Title of Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Website Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Has this organization ever received a grant from the Irvine Christian Foundation?

Yes No

Amount of Request: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total Project Cost: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Provide a brief history of the organization, reasons for its formation, its charitable purpose, and description of existing services. Include current programs and accomplishments, number of staff, volunteers, and current population served (e.g. number served per year, geographic location, socioeconomic status, gender, and age).
2. As the major goal of the Foundation is Christ’s Great Commission and to win souls for Christ, please give a brief explanation of how your project meets our purpose.
3. Provide a description and need for the proposed program or project for which the funds are requested.
4. Provide a project budget including income and expenses.
5. Provide a list of entities asked to give financial support for the proposed project (include their response date and dollar amount).
6. What is the number and description of people who will benefit from this program or project? Describe desired results, benefits, and how these results will be measured, with a plan to evaluate the project.
7. What is the timeline for startup, completion, and expenditure of funds?

The undersigned represents that her or she has the authority to sign this application on behalf of the above organization and that Irvine Christian Foundation will be notified if any of the organizational or operational information contained herein changes or if the organization is officially recognized by the IRS as tax-exempt.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_