

(Component Fund name here)
PROGRAM GRANT APPLICATION

APPLICANT INFORMATION

Name:		
Address:		
City:	State:	ZIP code:
Telephone:		
Contact person:		Title:
Telephone:	Email:	

TYPE OF ORGANIZATION

Type of business:	<input type="checkbox"/> 501(c)(3)	<input type="checkbox"/> Unit of Government	<input type="checkbox"/> Other (specify)
501(C)(3) NON PROFIT OR GOVERNMENTAL FISCAL AGENT (IF DIFFERENT FROM ABOVE)			
Name:			
Address:			
City:	State:	ZIP code:	
Contact person:		Title:	
Telephone:	Email:		

PROJECT INFORMATION

Name of Project	
TOTAL PROJECT COST	\$
Amounts requested from <i>(component fund)</i>	\$
Other local sources	\$
Other sources	\$
Project Period:	From: _____ To: _____
Number of participants expected to be involved in this project:	

CERTIFICATION

I certify that the information contained in this grant applications is true and correct to the best of my knowledge and belief, and that I have the authority to apply for the funds requested:

Signature:	Title:	Date:
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(Component Fund Name)

Program Grant Application

While you may use a different form for communicating the proposed budget, it is important that the format include both cash and in-kind costs and sources of funds.

PROPOSED BUDGET

Proposed Project Name:

Proposed Project Period:

From:

To:

ESTIMATED COSTS ASSOCIATED WITH PROJECT	CASH FROM FUND OR FOUNDATION	CASH FROM OTHERS	IN-KIND SUPPORT	TOTAL PROJECT
Salaries				
Travel				
Communications (postage, printing, telephone, etc.)				
Occupancy (rent, utilities, insurance, etc.)				
Supplies				
Equipment				
Contractual Services				
Administrative Expenses				
Other: (specify)				
Other: (specify)				
TOTAL COSTS				
SOURCES OF FUNDS FOR PROJECT	CASH FROM FUND OR FOUNDATION	CASH FROM OTHERS	IN-KIND SUPPORT	TOTAL PROJECT
(Component Fund) or Foundation				
Applicant				
Other Local Sources				
Other Foundations				
Fees				
Other: (specify)				
Other: (specify)				
TOTAL SOURCES OF FUNDS				

(Component Fund Name)	Program Grant Application
PROGRAM NARRATIVE	
Proposed Project Name:	
Proposed Project Period:	From: _____ To: _____
Number of participants expected to be involved in the project:	
How many groups will be involved in this project:	
Type of project: (check appropriate area)	
<input type="checkbox"/> New curriculum <input type="checkbox"/> New equipment <input type="checkbox"/> Expansion of current programs	
Narrative description of the project and how funds will be utilized:	
What are the expected outcomes and how does it relate to improving the quality of life for the community?	
If more space is needed for the above questions, please attach the necessary pages.	
ATTACHMENTS	
1. If application is from the school or city, a resolution from its governing body authorizing application for funds. 2. Copies of any letters or agreements documenting: <ul style="list-style-type: none"> • Cooperation of other collaborating in the project • Commitments of other financial support to the project 	