Cover Sheet

Foundation you are app	olying to:			
Legal Name of Applica	ant Organization:			
Project Name (if applic	cable):			
Funds will pay for:				
Full Mailing Address:				
Location(s) if different	from above:			
Executive Director:				
Phone:	Fax:			
Email:		Website:		
Contact Person & Title	:	Phone:		
Tax-exempt Status:(Mos $501(c)(3)$ Granted \square	t foundations require 501(c)(3) s Tax I.D. Number:	ostatus. You must check this requirement before Other:	re applying.)	
Type of Request: Che	ck with individual foundation	s to determine the types of accepted gran	t requests.	
General Support □	Program Support □	Seed Funding \square Research \square]	
Capital ☐ End	owment Multi-Ye	ear Other:		
This Grant Request: \$		Total Project Budget: \$		
Grant Period from:		To:		
Total Organizational B	udget for Current Year: \$	Fiscal year begins:		
Summarize the organiz	cation's mission statement (tw	vo to three sentences):		
Summarize your grant	request (two to three sentence	es):		
Proposal Authorizat	<u>ion</u>			
		the best of our knowledge true and accurate a ly's full knowledge and endorsement:	and is	
Signature	Name & Title of Authorize	ed Board/Governing Body Representative	Date	
Signature	Name & Title of Authorize	ed Board/Governing Body Representative	Date	

Proposal Narrative

Directions: Limit your Proposal Narrative to **four (4) pages maximum, with 0.8 inch margins, 12 point font or larger**. Fill in each section using the specific questions below as boldface headings with your responses in normal text.

Background (One page or less)

- 1. Your organization's history and accomplishments.
- 2. Your current programs and activities. Include the constituency you serve, with specific demographic information. How are they actively involved in your organization and/or how do they benefit from your organization's work?
- 3. Your organization's relationships both formal and informal with other organizations working to meet the same need. In what way does your work differ from that of other organizations?

Funding Request

- 1. What need or problem does your project work to address?
- 2. In a short paragraph, tell us your project's (or organization's) goals and the specific outcomes you project for the grant period (i.e. numbers served, behavior or attitudes changed, capital project completed, etc.).
- 3. Describe your project or the capital items requested, including:
 - Whether the project is new, ongoing or an expansion
 - Target audience, including specific demographic information
 - Activities/strategies that will be used to meet your stated outcomes
 - General timeline for the main objectives of your project
- 4. If this is a request for General Support, what are your organization's most pressing needs?
- 5. How do you plan to evaluate the effectiveness or impact of the project?
- 6. Summarize the skills and relevant experience of key staff/volunteers essential to the project's success. If other organizations are collaborating on this project, note which ones and in what ways.
- 7. If full funding is not available, what is the contingency plan for securing additional support and/or how can you modify your proposal?

Board of Directors/Governing Body

Directions: Attach additional sheets if necessary.

Name	City	Affiliation/Profession	Board Position	Yrs. of Service

How often does your governing body meet?

Project Budget

Note: Check with ea								
Organization Name:								
Name of Project (if	different):							
Budget dates for gra	nt period:							
INCOME Possible categories: 0	Government grants, found	lation grants, individuals,	business support, even	ts, fees for service, etc.				
Source	Total Project (\$)	Pending (\$)	Secured (\$)	Notes				
_								
TOTAL INCOME								
				List the In-Kind (non-cash) contributions: EXPENSES Possible categories: Salaries, professional fees, rent and utilities, travel, publicity/outreach, events, capital items, etc.				
<u>EXPENSES</u>				nts, capital items, etc.				
<u>EXPENSES</u>				nts, capital items, etc.				
EXPENSES Possible categories: S	'alaries, professional fees	, rent and utilities, travel,		-				
EXPENSES Possible categories: S	'alaries, professional fees	, rent and utilities, travel,		-				
EXPENSES Possible categories: S	'alaries, professional fees	, rent and utilities, travel,		-				
EXPENSES Possible categories: S	'alaries, professional fees	, rent and utilities, travel,		-				
EXPENSES Possible categories: S	'alaries, professional fees	, rent and utilities, travel,		-				
EXPENSES Possible categories: S	'alaries, professional fees	, rent and utilities, travel,		-				

TOTAL EXPENSES

Organization Financial Summary

rganization Name:	Fi:	scal Year Dates:	
NCOME			
Possible categories: Government gra	nts, foundation grants, individu	als, business support, events,	fees for service, etc.
Source	Prior Year's Actual	Projected Annual Budget (\$)	YTD Actual (\$) as of [/ /]
TOTAL INCOME			
EXPENSES			
EXPENSES			
EXPENSES Possible categories: Salaries, professi	ional fees, rent and utilities, tra	vel, publicity/outreach, events	yTD Actual (\$)
EXPENSES Possible categories: Salaries, professi	ional fees, rent and utilities, tra	vel, publicity/outreach, events	yTD Actual (\$)
EXPENSES Possible categories: Salaries, professi	ional fees, rent and utilities, tra	vel, publicity/outreach, events	yTD Actual (\$)
EXPENSES Possible categories: Salaries, professi	ional fees, rent and utilities, tra	vel, publicity/outreach, events	yTD Actual (\$)
EXPENSES Possible categories: Salaries, professi	ional fees, rent and utilities, tra	vel, publicity/outreach, events	yTD Actual (\$)
EXPENSES Possible categories: Salaries, professi	ional fees, rent and utilities, tra	vel, publicity/outreach, events	yTD Actual (\$)
EXPENSES Possible categories: Salaries, professi	ional fees, rent and utilities, tra	vel, publicity/outreach, events	yTD Actual (\$)
EXPENSES Possible categories: Salaries, professi	ional fees, rent and utilities, tra	vel, publicity/outreach, events	yTD Actual (\$)
EXPENSES Possible categories: Salaries, professi Item	ional fees, rent and utilities, tra	vel, publicity/outreach, events	yTD Actual (\$)
EXPENSES Possible categories: Salaries, professi Item TOTAL EXPENSE	ional fees, rent and utilities, tra	vel, publicity/outreach, events	yTD Actual (\$)
EXPENSES Possible categories: Salaries, professi Item	ional fees, rent and utilities, tra	vel, publicity/outreach, events	yTD Actual (\$)
TOTAL EXPENSE	ional fees, rent and utilities, tra	vel, publicity/outreach, events	yTD Actual (\$)

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Organization Balance Sheet Summary

Note: Check with each foundation to see if this form is required.

ASSETS	MOST CURRENT (\$) as of [/ /]	PRIOR YEAR CLOSE (\$)
Current Assets		
Cash and Equivalents		
Accounts Receivable		
Prepaid Expenses		
Inventory		
Grants/Pledges		
Receivable		
Other		
Fixed Assets (Net)		
Property		
Buildings		
Equipment		
Investments		
Endowments		
Other		
TOTAL ASSETS		
LIABILITIES		
Current Liabilities		
Accounts Payable		
Accrued Expenses		
Long Term Debt		
(Current Portion)		
Short Term Debt		
Other		
Long Term Debt (over a year)		
Loan		
Other		
TOTAL LIABILITIES		
Net Assets		
Unrestricted		
Temporarily Restricted		
Permanently Restricted		
TOTAL LIABILITIES AND		
NET ASSETS		