

## 2019 Grant Application

### Organizational Profile

Date of application: \_\_\_\_\_

Organization name: \_\_\_\_\_

Year founded: \_\_\_\_\_

Employer Identification Number: \_\_\_\_\_

Street address/city/state/zip: \_\_\_\_\_

Executive Director: \_\_\_\_\_ Phone: \_\_\_\_\_ email: \_\_\_\_\_  
(Or equivalent, please state title)

Development Director: \_\_\_\_\_ Phone: \_\_\_\_\_ email: \_\_\_\_\_  
(Or equivalent, please state title)

Please indicate the primary contact for this grant application: \_\_\_\_\_

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

Describe the mission of your organization: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Number of full-time employees: 2018 \_\_\_\_\_ 2017 \_\_\_\_\_

Number of people served: 2018 \_\_\_\_\_ 2017 \_\_\_\_\_

Signature and Title of responsible Officer of your organization: \_\_\_\_\_

Include current list of board of trustees and their occupation

PLEASE LIMIT YOUR RESPONSE TO THE QUESTIONS BELOW TO A MAXIMUM OF 4 PAGES

1. What is the purpose of this grant proposal and what dollar amount is requested?



## **Financial Information**

- Specific amount requested: \_\_\_\_\_
- Annual budget: \_\_\_\_\_
- Request is \_\_\_\_\_% of your annual organization budget
- List other sources of funding applicable to the proposal. List each source and amount requested. Indicate if the status of the funding is pending, committed or received and for what year:

Source: \_\_\_\_\_ Amount: \_\_\_\_\_ Status: \_\_\_\_\_ Year: \_\_\_\_\_

Source: \_\_\_\_\_ Amount: \_\_\_\_\_ Status: \_\_\_\_\_ Year: \_\_\_\_\_

Source: \_\_\_\_\_ Amount: \_\_\_\_\_ Status: \_\_\_\_\_ Year: \_\_\_\_\_

- Percentage of Board Members who contribute financially to your organization \_\_\_\_\_%  
Total Board Contributions: \_\_\_\_\_
- Number of full Board meetings last year: \_\_\_\_\_  
Average % of Board members in attendance at those meetings \_\_\_\_\_%
- List the organization's top three salaries, including benefits.

Position: \_\_\_\_\_ Salary: \_\_\_\_\_ Benefits: \_\_\_\_\_

Position: \_\_\_\_\_ Salary: \_\_\_\_\_ Benefits: \_\_\_\_\_

Position: \_\_\_\_\_ Salary: \_\_\_\_\_ Benefits: \_\_\_\_\_

- Does your organization have an endowment? \_\_\_\_\_  
What is its worth? \_\_\_\_\_
- List amount of all outstanding debt as of application date: \_\_\_\_\_
  - Attach current organizational budget
  - Attach actual budget from last year
  - Attach project budget, if applicable
  - Attach current list of board of trustees and their occupation