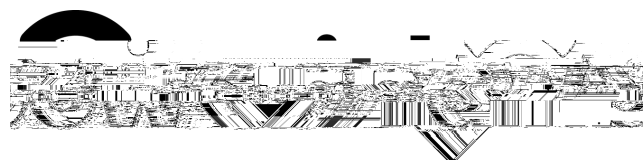


F J T a S I a P c I O C

- B
- C
- E
- F



Community Grant Application

Organization Name:

Street Address:

City:

State:

Postal Code:

Phone Number:

Point of Contact's First/Last Name:

Point of Contact's Title:

Phone Number :

Email Address:

Project Name:

Project Location:

Brief explanation of organization's history, goals, and objectives.

Which category does your application fall under?

Business and Economic Development

Community Development

Education

Foundation

Provide an executive summary of the project.

Community Grant Application (continued)

:KDW LV WKH JRDO RI \RXU SURMHFW"

3OHDVH GHVFULEH WKH RYHUDOO LPSDFW WKH SURMHFW ZLOO KDYL

Why is your organization the best to address the challenge? Are you working with other organizations in your community to complete the project?

Community Grant Application (continued)

What is the estimated number of people your project will affect?

What is the timeline for your project? (When will you project start and end? Please use MM/YYYY – MM/YYYY format.) If your project can not be completed within one calendar year, please include explanation as to why?

What is the end goal and how will you measure success?

Is the project sustainable? Will the project continue after year one? How?

Community Grant Application (continued)

Is there a way for Internet to be incorporated in this project? If not, why?

Requested grant amount (grant amount maximum is \$ 10,000) .

How much is the total project? If the project is more than \$10,000, how will the project be fully funded?

Upload your 501 (c)(3) documents if applicable .

Upload any additional supporting documents .

