

Grant Application



Applicant Information

Applicant *	
Type of Organization *	Non-Profit School Business
Year Established *	
Federal ID Number *	
Address *	
City *	
Zip Code *	
State and Date of Incorporation *	
Phone Number *	
Fax Number	
Contact Person *	
Phone *	
Fiscal Agent (if applicable)	

Project Information

Project Name *	
Amount Requested *	\$
Total Project Budget *	\$
Project Duration (Start up & Completion Dates) *	
Project Service Area *	
Other Participating Agencies/Organizations	

Certification

<input type="checkbox"/> I agree I certify that the information contained in this proposal is true and accurate to the best of my knowledge and belief. I further certify that this grant application is submitted with the full knowledge and endorsement of the governing board of this organization, which is empowered to enforce compliance with all contract conditions.	Signature(s) * _____
	Name(s) and Title(s) * _____
	Today's Date * _____

Project Summary & Narrative

Use additional sheets as necessary.

<p>Summarization of Company's Goal *</p>	<p>Briefly summarize (2-3 sentences) the specific purpose for which you are requesting funds.</p>
<p>Background/Goals/Objectives *</p>	<p>What is the purpose of this grant request? Clearly describe what you expect the project to achieve. The proposal must illustrate how project goals address the reduction or prevention of waste. What are some of the barriers or conditions that are preventing the realization of the goals?</p>
<p>Strategies/Time Frame *</p>	<p>Describe the specific steps you propose to address the problem. Develop a timeframe that includes a plan of work and proposed deadlines for the project. How will you assure the project will continue, if appropriate?</p>
<p>Monitoring and Evaluation *</p>	<p>Describe your plans to monitor progress and evaluate the project's impact. Please indicate how this project could become a model for other agencies, schools or groups to copy.</p>

Project Budget

Funding Request is for *	
Funding Request is for months *	
Total Project Budget *	
Total Authority/Organization Budget (current fiscal year) *	
Project Expenses *	List project expenses and specify how requested funds will be used.
Project Income *	If the funds requested do not constitute full support for your project, please list other sources of income. Indicate whether funds are committed or anticipated.
Budget Prepared by *	
Phone *	