

GRANT APPLICATION

Date of Application _____

Grant Applicant's Organization Name _____

Please include a copy of the IRS Tax Exempt Status under 501(c)(3) or 501(c)(1) of the Internal Revenue Code if applicable.

Name of Applicant _____

Organization Title _____

Street/Mailing Address _____

City _____ State _____ Zip Code _____

Telephone _____ Email _____

Website _____

Amount of Request _____ Payable To _____

Program Description. *Describe your proposal in 250 words or less:*
