



Applications are reviewed by the B.A. & Esther Greenheck Foundation four times per year. Submit the **original application, plus 10 copies** by the first business day of February, May, August or November for consideration in that grant cycle.

APPLICANT INFORMATION:

Date submitted:

Organization Name:

Contact Person:

Address:

City:

State:

Zip:

Phone Number:

FAX:

E-Mail Address:

PROJECT INFORMATION:

Name of project you are requesting funding for:

Area of our Mission Statement that your project addresses:

The Arts

Education

Health

Social Service

Resource Preservation

Type of project that funds are requested for:

Agency Programming
Capital Improvements
Community Awareness
Curriculum Development
Exhibition or Performance

Equipment / Supplies
Research / Studies
Scholarships
Other (describe)

Project Summary (to be more fully explained in narrative response):

Is this a new or ongoing program? New Ongoing Both

Project Start Date:

Project End Date:

Total Project Expenses: \$
(should equal total on budget page)

Amount Requested of this Funder: \$

How many people will this project serve?

Directly
Indirectly

Date funding is needed by:

Targeted population to be served by this project: General Public Children Youth Adults
Elderly Disabled Low-Income Minorities Special Needs Males Females

Geographic area served:

Has this project been authorized by your agency's governing board: Yes No

Projects previously funded through the B.A. & Esther Greenheck Foundation:

Date: Grant amount: Project:

ADDITIONAL ORGANIZATION INFORMATION:

Year of Incorporation:

Is your organization an IRS 501(c)(3) not-for-profit? Yes No Pending Approval

Is your organization name the same as it appears on your IRS Letter of Determination? If not, explain.

Yes No

Is your organization an affiliate of an "umbrella organization" such as United Way or the Performing Arts Foundation? Yes No

If yes, name of umbrella organization:

Organizational fiscal year: Total annual budget:

Has your governing board approved a policy which states that your organization does not discriminate on the basis of race, ancestry, color, age, familial status, handicap, religion, gender, sexual orientation, marital status, lawful sources of income, national origin, or any other discriminatory practice prohibited by state or federal law? Yes No

Applications for school related projects require the signature of the District Superintendent.

We certify that the information provided in this application is correct to the best of our knowledge. We understand that additional information may be required by the B.A. & Esther Greenheck Foundation to aid in their review of this request and are available to answer your questions.

Chief Executive / President: _____ Title: _____

Signature of Chief Executive / President Date: _____

Contact Person _____ Title: _____

Signature of Contact Person Date: _____

PROJECT BUDGET

PROJECT EXPENSES

Personnel \$
 Facilities/Occupancy
 Equipment/Supplies
 Printing/Promotion
 Meeting/Travel
 Postage
 Telephone
 Other (specify)

TOTAL PROJECT EXPENSES

\$ *

SOURCES OF PROJECT REVENUE

	Secured Funding	Funding Applied For	=	Total
Grants (including Venture)	\$	\$	=	\$
Contracts	\$	\$	=	\$
County Government	\$	\$	=	\$
City Government	\$	\$	=	\$
State Government	\$	\$	=	\$
Federal Government	\$	\$	=	\$
Individuals	\$	\$	=	\$
Foundations	\$	\$	=	\$
Corporations	\$	\$	=	\$
Umbrella Organization	\$	\$	=	\$
Other (specify)	\$	\$	=	\$
Earned Income				
Events	\$	\$	=	\$
Publications & Products	\$	\$	=	\$
Other (specify)	\$	\$	=	\$
Membership Income	\$	\$	=	\$
In-kind Support	\$	\$	=	\$
Fees	\$	\$	=	\$
Other	\$	\$	=	\$

TOTAL PROJECT REVENUE

\$ *

***Total Project Expenses should equal Total Project Revenue**

NARRATIVE AND ATTACHMENTS

*The B.A. & Esther Greenheck Foundation requires that you submit the **original application**, including these attachments, **plus ten copies**. Please provide the information for questions 1 through 9 in three typewritten pages or less. It is not necessary to include promotional materials from previous projects.*

PROJECT INFORMATION:

1. Describe the project for which you are seeking funds, including goals and objectives (purpose of grant).
2. What is the community need for this project?
3. Are there any similar projects currently operating in the community? If so, how is your program different, and why is it also needed?
4. List names and amounts requested of other foundations, corporations, or other funding sources to which this proposal has been submitted. Put an asterisk (*) by those committed to funding; note any matching fund requirements. (Some foundations will require documentation from committed funding sources.)
5. List other organizations participating in the project and describe their roles.
6. What are the long-term strategies for funding of this project at the end of the grant period?
7. Explain how you will measure the effectiveness of your activities (include samples of evaluation instruments used, if any.)
8. Explain the mission of your organization.
9. Highlight current programs, activities, and accomplishments of your organization.

ATTACHMENTS (to be included with the **original application and 10** copies):

- A. List of names, qualifications (or resumes) and job descriptions of key staff and/or volunteers responsible for implementing the project.
- B. Organizational structure, including board, staff, and volunteer involvement.
- C. List of board of directors that includes names, occupations, places of employment and related community affiliations.

INCLUDE THE FOLLOWING ATTACHMENTS WITH THE ORIGINAL APPLICATION ONLY:

- A. A copy of current IRS determination letter indicating 501(c)(3), or 509(a) tax exempt status, or evidence that the organization is not a private foundation as defined in Section 509(a). If not available, explain application status. OR
- B. If you are being sponsored by another agency, submit their tax-exempt letter and a signed letter from them indicating their sponsorship.
- C. A copy of your most recent annual financial statement.