

Funding Request

1) Applicant Organization: _____

2) Street Address _____

3) City, State, Zip Code _____

4) Contact's Name and Title _____

5) Telephone _____

6) E-mail address _____

7) Is this a 501 (c) (3) non-profit _____

8) Organization mission: _____

9) Purpose of funding request and the organization's strategic link to this funder:

10) Amount of Funding Requested _____

11) Please list the proposal's target population, constituents and geographic area:

12) Number of Board Members _____ Number of Volunteers _____

13) Number of staff: Full Time _____ Part Time _____

14) Total Annual Organization Budget: _____

15) Fiscal Year End _____

16) Budget for this proposal _____

17) Time period for this request _____

18) Please identify previous support received from this funder in the past 5 years:

Authorized Signer

Date