

The Glens Falls Foundation

GRANT APPLICATION

A Community Foundation for the Greater Glens Falls Area

Name of Organization _____

Contact _____ phone _____

Mailing Address _____

Amount of Grant Request _____

Purpose of Grant _____

_____ Capital projects

_____ Equipment purchases

_____ New initiatives

_____ Special projects

Check that your application contains the following information:

_____ **Overview:** Background information on the organization including a brief history, a description of the activities or services carried out by the organization, and a list of officers and directors.

_____ **Purpose of Request:** (a) A detailed description of the proposed project including the need the project is intended to address, (b) the scope of the project in terms of geographic area and population to be served, goals and objectives, (c) the plan of action and a timetable, the time period to be covered by the requested grant, and (d) the amount of the grant requested and the benefits to be derived.

_____ **Finances:** Provide a current budget of the organization/cause, and if applicable, a budget for the project, showing sources of other funding and the use of funds.