

The Glens Falls Foundation

GRANT APPLICATION

A Community Foundation for the Greater Glens Falls Area

Name of Organization _____

Contact _____ Phone _____

Mailing Address _____

Email 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 intending 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.