



The Enterline Foundation Grant Application Information

Applicants must complete the grant application in one sitting. You will not have the opportunity to save your application and return at a later time to complete it. As such, please make sure you have all the information listed below before you start the application.

- Full legal name of organization
- Mailing Address
- Primary contact name
- Primary contact title
- Primary contact phone number
- Primary contact email
- Annual operation budget
- New assets of organization as reported on Form 990
- Date of last financial audit
- Website
- Grant amount requested

Grant Summary

Please provide a brief 2-3 line description of the project/program and, specifically, the expected end result(s) to be achieved by grant funding. *Additionally, please note that, if awarded funding by the Foundation, the grant summary provided within this application may be used in the Foundation's marketing and informational materials.*

Example: Requested funds will be used to support our after school program, which targets developmentally disabled youth during out-of-school time. Specifically, grant funds will provide a safe environment for 25 such youth ages 12-15, to encourage positive behaviors and improve academic performance.

Do you need any licensing, zoning or other regulatory approval to conduct this project? Yes No
If yes, please explain.

If you have previously received a grant from the Foundation, please indicate in the space below:

Date of Grant	Grant Amount	Grant Purpose or Project Name

Approval of Executive Director will be required to move forward. Approval verified via electronic signature.

Grant Proposal Summary & Grant Project Description

Please concisely address the following questions.

- A. What is your organization's mission?
 - B. What is your organization's vision?
 - C. Please list any core values if applicable.
 - D. Please briefly describe the project and name the three or four critical steps in your work plan.
1. What **problems** are you addressing, in what service area (neighborhood, countywide, etc.) and about **how many individuals** within the service area have the problem?
 2. How many individuals will you serve?
 3. What **results are you committed to achieving**, meaning change in participant behavior and/or condition, and for **how many persons**?
 4. How will you know when your **results have been achieved**? What information or evidence will you use to **verify success**?
 5. What have you achieved in the **past three years** that most closely aligns with the project for which you seek support?
 6. Who is **the person** or persons who will lead the program or project to its results? What factors in that leader(s) most predict success?
 7. If you do not receive full grant funds for this application, **how will that impact** your ability to achieve the results stated?

Upload the following documents:

- Project Budget Form
- Annual Operating Budget for the previous year.
- Annual Operating Budget for the current year.
- A list of the current Board of Directors.
- Proof of tax-exempt status.