



Grant Application Cover Sheet

Please check the appropriate funding request:

____ New project request for funds

____ Additional funds to continue and/or complete previously funded project

Group/Organization sponsoring this project: _____

Tax-exempt number for this organization: _____

Contact person from this organization: _____

If applicable, title or position of individual: _____

Mail address: _____

Email address: _____

Phone number: (H) _____ (C) _____ (W) _____

Other individuals actively participating in the execution of the project: _____

Name of Project: _____

Location of project: _____

Amount of grant funds being requested: _____

Other sources of funds for project: _____

Description of project: _____

Estimated beginning date of project: _____

Estimated completion date of project: _____