

Identify the principal ways you intend to use the funds requested in your grant application:

Statement of how the project fits the mission and capacity of your organization:

Is your project an existing program or a new, start-up program? Existing New

Organization Information

Name of Your Organization _____

(Any other names within last five years) _____

Street Address _____

City, State, Zip _____

P.O. Box _____

City, State, Zip _____

Telephone Number _____ FAX Number _____

E-Mail Address _____ Web Site Address _____

Primary Contact Name _____

Title _____

Telephone Number _____ FAX Number _____

E-Mail Address _____

Other Involved Entities, Contacts

Did you receive funds from United Way? Yes No

Signature of Project Manager or Director _____ Date _____

Signature of Board Chairperson
or Senior Executive Officer _____ Date _____