



Grant Application Request

ABOUT YOUR ORGANIZATION

Legal Name: _____

Tax Identification Number: _____

Address: _____

Website: _____

Name of Executive Director: _____

Phone Number of Executive Director: _____

Email of Executive Director: _____

Organization's fiscal year end: _____

Provide the organization's mission statement as listed on the most recent Form 990:

Please submit the following documents with this Grant Application Request:

- List of the organization's current Board of Directors including employer and position, if applicable, and community involvement.
- Budget versus actual for current year and prior two fiscal years with accountant's report, if applicable.

FUNDS APPLICABLE TO YOUR GRANT APPLICATION REQUEST

The following funds provide funding annually in the Spring, through a competitive grant application process. Select the fund and its corresponding amount that is applicable to this grant request. More than one fund may be selected, if applicable.

<u>Funds</u>	<u>Grant Amount</u>
Margaret A. Friedland Fund for Children in Manitowoc County Supports, encourages, and promotes programming and opportunities for positive growth for low income and disadvantaged children in Manitowoc County.	\$5,100.00
Lakeshore Protecting Animal Welfare Fund Supports the health and welfare of companion animals in Calumet, Manitowoc, and Sheboygan Counties.	\$4,600.00
The Open Hand Fund Supports human needs as well as organizations with Protestant and Evangelical affiliations located in Manitowoc County.	\$4,400.00
Raleigh and Agnes Sorge Charitable Fund Supports human needs in Manitowoc County.	\$2,600.00
Love Your Neighbor Fund Supports the work of any qualified charitable organization in Manitowoc County. Two distributions will be awarded for the following amount:	\$7,100.00
Anonymous Fund Supports the work of qualified charitable organizations in Manitowoc County within any of the following areas of interest: <ul style="list-style-type: none">➤ Conservation: land, wildlife, environment, education.➤ Music education.➤ Youth development, including development for youth with disabilities.	\$1,200.00

ABOUT YOUR REQUEST FOR FUNDS

Important: Responses are limited to the space provided for each question. Use detailed data where appropriate. If an acronym is used, identify its proper name. Do not attach additional pages. If additional information is needed, it will be requested.

- **In one (1) sentence or phrase, summarize the proposed project/program for which funding is requested. For example, “an employment program for residents at the homeless shelter”.**

➤ **What is the desired outcome of the project/program?**

➤ **How will this project/program be implemented and accomplished? Include collaboration with other organizations.**

➤ **What metrics will be used to assess the progress and outcomes of this project/program? If this is an existing program, what are the metric results from prior years?**

➤ **Explain how the project/program is consistent with your mission statement.**

Budget

Itemize the project/program expenses for which funding is requested.

Line	Budget Expense Item	Amount
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
	Total Budget Expenses:	

Other Funding Sources

List other funding sources that will be used to implement the project/program. Include “in-kind” and “matching” funds as well as any funds that will be drawn from the operating budget and/or reserve fund or endowment.

Line	Funding Source	Amount Requested	Is Request Pending or Confirmed?
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
	Total Funding Sources:		

