

**PROPOSAL COVER SUMMARY**

**ORGANIZATION PROFILE**

Date:

Legal Name of Organization:

Address:

City:

Zip Code:

Phone:

Web site:

Executive Director/CEO:

Mailing Address (if different)

Phone:

Fax:

E-mail:

Primary Contact:

Title:

Mailing Address (if different)

Phone:

Fax:

E-mail:

Collaborative partners (if applicable):

Organization's mission:

Organization's constituents/population(s):

**TAX STATUS AND FINANCIAL PROFILE**

501 (c)(3)

Public entity (e.g. schools, towns, etc.) specify:

Other – specify:

Fiscal agent (if applicable):

Address:

Contact:

Phone:

Fax:

E-mail:

*Attach a copy of the written agreement from the Fiscal Agent and their 501(c) (3) documentation.*

Total Application Amount: \$                      Total Project Budget: \$

The period covered by this grant: \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Total annual organization operating budget: \$

Fiscal Year \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

**PROJECT PROFILE**

Project/Initiative Title:

Proposal Summary – please provide a brief description of the proposed project (maximum 4 sentences):

Please describe the project’s strategic links to the Foundation’s program interests and overall mission (maximum 3 sentences):

Describe what will be accomplished with the funds requested (maximum 3 sentences):

Geographic area(s) to be served by this project:

Target population(s) to be served by this project (# and description):

**PROPOSAL REQUIREMENTS – Please see grant guidelines for proposal requirements.**