

# GRANT APPLICATION

Organization: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Website: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Title: \_\_\_\_\_

Direct phone line: \_\_\_\_\_

Email: \_\_\_\_\_

**Current tax-exempt status of organization:**

(Note: prior to final grant approval, evidence of tax exemption from the IRS may be requested.)

- 501 (c)(3) and 509(a)
- Public School (school name): \_\_\_\_\_
- Other (explain and include documentation): \_\_\_\_\_

**Description of the organization:**

Title of Project/Program: \_\_\_\_\_

**Statement of specific request:**

Total Project Budget: \$ \_\_\_\_\_ Total Grant Requested of AGC: \$ \_\_\_\_\_

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**Summary of program: (approximately 500 words or less)**

**Goals and objectives: (approximately 500 words or less)**

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**Measure of success: (approximately 500 words or less)**

**Proposed timeline:**

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**Budget/Financials: (a separate attachment for this section may be submitted)**

*Please include sources and amounts of other funding obtained, pledged or requested for this purpose, including the plans for fundraising the total cost of this project or program.*

***After reviewing the initial grant application proposal, additional information may be requested by the AGC Workforce Development Committee.***