

## **Grant Application**

| Organization Name   |                                    |  |
|---|------------------------------------|--|
| Tax ID Number   |                                    |  |
| Tax Exemption Status  | 501(c)(3) tax-exempt organization  |  |
| (check one)   | Private foundation                 |  |
|   | ☐ Church or religious organization |  |
|   | ☐ Governmental agency              |  |
|   | Other                              |  |
| Organization Address  |                                    |  |
| Organization Telephone  |                                    |  |
| Organization Website  |                                    |  |
| Executive Officer Name/Title  |                                    |  |
| E-Mail Address  |                                    |  |
| Telephone   |                                    |  |
| Person Completing   |                                    |  |
| Application/Title   |                                    |  |
| E-Mail Address  |                                    |  |
| Telephone   |                                    |  |
| In three sentences or less (which may be used for a social media post should your grant be funded), tell us how your organization works to improve quality of life in our community:  |                                    |  |
| Are you or your nonprofit organization a member of the North Alabama Association of   |                                    |  |
| Fundraising Professionals?  |                                    |  |
| Has your nonprofit organization earned the Alabama Association of Nonprofits' Standards for   |                                    |  |
| Excellence Seal? Yes No <a href="http://www.alabamanonprofits.org/standards-for-excellence">http://www.alabamanonprofits.org/standards-for-excellence</a> Are you on the CharityTracker network? Yes No <a href="http://huntsvilleal.charitytracker.net">http://huntsvilleal.charitytracker.net</a> |                                    |  |
| What Pathway to Sustainability cohort are you in or have you graduated from?_   |                                    |  |
|   |                                    |  |

| Project Name:  |  |  |
|--|--|--|
| Amount Requested:  |  |  |
| Number to Be Served by Grant:  |  |  |
| Project Start Date:  |  |  |
| Project Executive Summary: In three sentences or less (which may be used for a social      |  |  |
| media post should your grant be funded), provide a summary of your project. (300 character |  |  |
| limit)   |  |  |
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| Project Description: Please descri   | be in detail the proposed project including the scope of |  |
| activities and the intended impact on clients. (2,000 character limit)                     |  |  |
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| Project Effectiveness: How will you measure the effectiveness of your project/program? |                               |  |
|--|-------------------------------|--|
| (2000 character limit)   |                               |  |
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| Which area(s) of our community's quality of life does your project impact:             |                               |  |
| ☐ Arts & Culture   | ☐ Environment                 |  |
| ☐ Basic Needs  | Health and Wellness           |  |
| ☐ Economic Opportunity   | ☐ Neighborhoods & Communities |  |
| ☐ Education  | Recreation                    |  |

## Please attach a budget for the proposed project.

The grant funder may require supplemental information to support this grant application.