

## Grant Application Cover Sheet

Please review the Trust's Mission and Priorities and Preferences before submitting an application. Attach all required submission documents as stated in the grant application guidelines.

Applicant Organization \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Organization Phone \_\_\_\_\_

Organization Website \_\_\_\_\_

Name and Title of Top Paid Staff \_\_\_\_\_

Phone \_\_\_\_\_

eMail \_\_\_\_\_

Name and Title of Contact Person Regarding Application \_\_\_\_\_

Phone \_\_\_\_\_

eMail \_\_\_\_\_

IRS 501(c)(3) Organization? Yes/No \_\_\_\_\_ Employer Identification Number (EIN) \_\_\_\_\_

If no, is your organization a public agency/unit of government? Yes/No \_\_\_\_\_

Amount Requested \_\_\_\_\_

Total Project Budget \_\_\_\_\_

Total Annual Organization Budget \_\_\_\_\_

Brief description of the request, including population and geographic are served:

Name and Title of Top Paid Staff or Board Chair \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

**REMINDER: SAVE this document after filling it out, prior to uploading to the website. Thank you!**