

APPLICATION

Application Date: _____

Project/Program Name: _____

Mailing Address: _____

Phone Number _____ Fax Number: _____

Contact Name: _____

Email Address: _____

Address: _____

Phone Number: _____ Fax Number: _____

Type of Organization: _____

Amount Requested: _____

IRS Classification:

501(c)3 _____ Date: _____

509(2) _____ Date: _____

OTHER: _____ Date: _____

Date organization was established: _____

Primary funding Source(s): 1. _____

2. _____

3. _____

Please list other Grants contributing to this specific need:

Statement of Need:

(Please provide a brief summary of the need for this grant. It should describe the condition in the community that is unacceptable and should be remedied. Use local data when available.)

Target Group:

(Describe the target beneficiary groups to be served, and the direct and indirect benefits that this target population will experience as a result of this grant.

Community Support:

(Describe the support you have for your project from the community. Explain how you plan to

partner or collaborate to maximize local community resources. If available, please provide letters of support from local agencies, businesses, etc.)

Sources of Revenue:

(Please list current revenue sources, participant fees, grants, etc.)

Please provide the following supporting documentation with your application:

- **Letters of support from local agencies, business, etc.**
- **Copy of IRS 501 (c) (3) status letter**

Eligibility Statement: *(Please sign to acknowledge compliance with eligibility criteria.)*

I hereby certify the information contained in the request is true and correct.

Signature of Project Manager

Organization

Date

Certification Statement: I understand that the completion and submission of this application in no way should be interpreted as obligating funding this project or having entered into a contractual agreement. Any incomplete, false, or misleading statement contained in this application or its attachments will result in the immediate termination of consideration and funding of this project by the The Ludlow Foundation. Having read and understood the above, and to the best of my knowledge and belief, I certify that this application is true, complete, and discloses all material information.

Signature of Project Manager

Organization

Date