

Date of Application: _____

Name of Applicant Organization: _____

Tax ID Number: _____

CEO/Executive Director: _____ Telephone Number: _____
NameContact for Application: _____ Telephone Number: _____
Name:

Agency Website (if applicable): _____

Describe the services provided by your organization: _____

- Project Category:
- Education
 - Environment
 - Arts and Culture
 - Community Development

Please provide a description of this project: _____

What short and long term benefits will the project deliver in relation to jobs, support for business, the community or the region? _____

Will you be seeking additional sources of funding for this project? Yes No If yes, please list: _____

Will there be a partnership with other community organizations on this project? Yes No If yes, please list: _____

List Amount Requested: _____
