



Date of Application: _____

Name of Applicant Organization: _____

Tax ID Number: _____

CEO/Executive Director: _____

Telephone Number: _____ Email: _____

Contact for Application: _____

Telephone Number: _____ Email: _____

Mailing Address: _____

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 (please list) No

Will there be a partnership with other community organizations on this project? Yes (please list) No

List amount requested: _____
