## Richfield Foundation 2018 Grant Application

Due October 31, 2018

##

## Organization Information

|  |  |
| --- | --- |
| Organization |  |
| Street Address |  |
| City, State, Zip Code |  |
| Phone Number |  |
| Website |  |
| IRS Tax Exempt Number |  |

## Contact Information

|  |  |
| --- | --- |
| Contact Person |  |
| Email |  |
| Phone Number |  |
| Street Address |  |
| City, State, Zip Code |  |

## Project Information

|  |  |
| --- | --- |
| Project Director |  |
| Email |  |
| Phone Number |  |
| Name of Project |  |
| Duration of Project |  |
| Project Cost |  |
| Grant Funds Requested |  |

## Grant Request Information

Please complete the questions on the following pages. If you need to exceed the space limit for a question, continue your answer on the last page.

### 1. Describe the purpose of the project and primary activities:

|  |
| --- |
|  |

### 2. Geographic area to be served by the requested grant (must include Richfield):

|  |
| --- |
|  |

### 3. Approximate number of persons potentially affected by the requested grant?  How many are Richfield residents?

|  |
| --- |
|  |

### 4. Describe how grant funds would be used for this project:

|  |
| --- |
|  |

### 5. How does your request match the Richfield Foundation’s grant priorities?

**Successful Kids – Secure Families – Strong Community**

|  |
| --- |
|  |

### 6. What other funding sources have you secured or are pursuing?

|  |
| --- |
|  |

### 7. Would this project proceed in some manner without funds from the Richfield Foundation?

|  |
| --- |
|  |

## Organization Background

Please attach a copy of your organization’s latest annual report, if possible. If available online, please provide the web address (instead of a paper copy). If the information requested below is provided in the annual report, you can answer “See annual report.”

### 8. Brief history of the organization:

|  |
| --- |
|  |

### 9. Statement of purpose of the organization:

|  |
| --- |
|  |

### 10. Describe the organization’s methods of achieving this purpose:

|  |
| --- |
|  |

### 11. Please attach documentation or provide a description of your organization’s funding: A copy of the 990 is preferred, if applicable. If you are not a registered 501c3 nonprofit organization, please explain how your finances are managed and if you have a fiscal agent (please include evidence of tax-exempt status for the organization managing your finances).

|  |
| --- |
|  |

### 12. Please provide a list of your Board Members and their affiliations:

|  |
| --- |
|  |

### 13. Describe the organization’s methods of achieving this purpose:

|  |
| --- |
|  |

## Additional Information

### If additional space is needed to complete a question, please do so here.

|  |
| --- |
|  |