



SHENANGO VALLEY FOUNDATION

GRANT APPLICATION COVER SHEET

Date of Application: _____ Organization Tax ID: _____

Legal Name of Organization Applying: _____
(Should be the same as on the IRS determination letter as supplied on IRS form 990)

Year Founded: _____ Current Annual Operating Budget: \$ _____

Executive Director: _____

Contact Person/Title (if different from Executive Director): _____

Address (principal/administrative office): _____

Mailing Address, if different from above: _____

City _____ State _____ Zip _____

Phone Number _____ Fax Number _____

Email Address: _____

Purpose of Grant (one sentence): _____

Beginning and Ending Dates of the Project/Campaign: _____

Amount Requested: \$ _____ Total Project Cost: \$ _____

Geographic Area Served: _____

Signature, Board of Directors Chairperson: _____ Date: _____

Typed Name and Title: _____

Signature, Executive Director: _____ Date: _____

Typed Name and Title: _____

Regional Affiliates



SHENANGO VALLEY FOUNDATION

Please structure your proposal to provide the following information in the order indicated. Use the headings and subheadings provided. Then, in your own words, address the questions and issues posed in the outline. The questions reflect the general interest and concerns of the Board of Directors of the SHENANGO VALLEY FOUNDATION, but are not intended to be conclusive. Please be thorough, yet strive for brevity. Although tightly written proposals are preferred, take the space you need to make your case.

A. NARRATIVE

1. Organization Information

- Summarize your organization's history
- State your mission and goals, future challenges, and long range plans.
- What makes your program unique?

2. Purpose of Grant

- Describe the proposed program or project.
- Identify the needs/problems to be addressed, target population and number of people to be served by the project.
- Describe the project goals and objectives, and your plan to meet them.
- Define the project as a new or continuing program.
- Identify other organizations, partners and funders participating in the project and their roles.
- Provide a timetable for implementation.
- Identify long-term funding resources.
- How will this program specifically affect Mercer, Trumbull, or Lawrence County?

3. Evaluation

- Describe your plan to document progress and results. Interim and final evaluation and expenditure reports will be required for every grant awarded.

B. ATTACHMENTS

*Please include **ONE SET** of the following attachments in the order indicated:*

1. Copy of the current IRS determination letter indicating 501 (C)(3) tax exempt status.
2. Organizational Structure, including:
 - List of officers and directors
3. Financial information, including:
 - Program or operating budget
 - Most recent audited financial statement.
4. Letters of support (optional) that substantiate need for the project and collaboration with other organizations.
5. Annual report, if available.

Regional Affiliates