



106 South Dodge Street ♦ Suite 210 ♦ Algona, IA 50511 ♦ (515) 295-7979
 Administrative Offices: P.O. Box 1176, Waterloo, IA 50704

GRANT APPLICATION FORM

Date: _____

**** Please keep application to two pages. Appendices (budget info, 501(c) 3 Letter, audit, etc.) allowed if necessary.**

Legal Applicant Requesting Funding/Fiscal Sponsor: _____

Organization Conducting Project (if different from Legal Applicant/Fiscal Sponsor: _____

Project: _____

Fed. Tax ID# of Legal Applicant / Fiscal Sponsor: _____

Address: _____ City: _____ State: _____ Zip: _____

Contact Person and Title: _____

Telephone: _____ Fax: _____ E-mail: _____

Amount Requested:\$ _____ Total Project Budget:\$ _____ Total Annual Agency Budget:\$ _____

Timeframe for Project: _____ Preferred payment date: _____

Type of Request: New Program/Project General Operations Support Capital Equipment/Materials
 Ongoing Support Other: _____

I. Organization

A. Briefly describe the purpose of your organization:

B. Organization's utilization of volunteers.

1. Number of volunteers annually: _____
2. How are these volunteers utilized?

II. Project

A. Describe the Community Need/Problem being addressed by this project.

