

**COUNCIL GROVE AREA FOUNDATION
APPLICATION FOR GRANT**

1. Organization Name: _____

2. Address: _____
 Street City State Zip

3. Organization's Officers:

4. Contact Person, Title, Phone:

5. Is this a tax-exempt organization? If so, date tax exempt status received:

6. Title of Project and Brief Description:

7. Geographic Area to be served:

8. What group will be benefited: Size of Group:

9. Anticipated Project Period: to

10. Is this a request for Capital, Operating Support, or a Special Project?

11. Total Project Cost: \$

12. Amount Requested from Foundation: \$

13. Amount and Source of Pledges or Commitments to Date:

14. Other Grant Applications or Funding Requests made for this project:

15. What action has been taken on the other applications or requests?

16. What is the purpose of this project; what specifically will it accomplish?

17. What are the problems this project will attempt to solve?

18. How will this project be implemented?

19. What local support is there for this project?

20. Who else in the community is working on this problem?

21. How will you coordinate with others working on this problem?

22. If awarded, how will the grant you are requesting be used?

23. Is there any additional information you would like to be considered in our determining whether to make this grant?

Signature _____ Date _____

(PLEASE RETURN APPLICATION TO FARMERS & DROVERS BANK, P.O. BOX C, COUNCIL GROVE, KANSAS, 66846)