



# GRANT APPLICATION COVER SHEET

Grant Project: \_\_\_\_\_ Amount Requested: \$ \_\_\_\_\_

Project Location: \_\_\_\_\_

Brief description of what the **Grant Money** would be used for:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Additional narrative in your proposal limited to 7 pages)

Maintained by: \_\_\_\_\_

(Name of Organization)

Project Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ / \_\_\_\_\_

(Day) Evening

Additional contacts who may be contacted regarding this project (different from above)

Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ / \_\_\_\_\_

(Day) Evening

Contact: \_\_\_\_\_ -1- Phone: \_\_\_\_\_ / \_\_\_\_\_

(Day) Evening

Sponsoring Organization: \_\_\_\_\_

(501 (c)(3) tax exempt holder)

Organization Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ / \_\_\_\_\_

(Day) Evening

Address: \_\_\_\_\_

**Verification of IRS 501(c)(3) must be attached.**

Brief description of organization: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_

Please read and refer to the CHC Foundation Brochure when completing your application!  
Contact the CHCF office if you have any questions.

## THIS COVER SHEET MUST ACCOMPANY ALL GRANT REQUESTS.

PLEASE COMPLETE THE GRANT REQUEST CHECKLISTH!

*Before submitting the Grant Application please include all items on check list or request may not be considered.*

- Cover Sheet
- Board of Directors
- Current 501 (c) (3)
- Project Budget
- Project Description
- Letters of Support
- Parent Organizations' Financial Statement