Please complete and submit this form to: admin@piedmontpraise.org. You may also attach any additional information that you feel may be relevant.

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| Date of Application: |
| Requesting Organization/Group/Individual’s Name: |
| 501(c)(3): Yes / No | If yes, FIN #: | Year Established: |
| Fiscal Sponsor (if organization does not have its own 501(c)(3): |
| **Mission Statement of Organization/Group/Individual’s Program:** |
|  |
| **Contact Information** |
| Address: |
| City: | State: | Zip Code: |
| Website (if applicable): |
| Contact Person 1: | Title/Position: |
| Phone #: | Email: |
| Contact Person 2 (optional): | Title/Position: |
| Phone #: | Email: |

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| **Grant Funds Distribution** |
| Organization/Activity Budget: $ | Grant Amount Requested: $ |
| Will this Grant Amount be Requested Annually? If yes, why? |
| Location of Activity: |
| Who will be served by this activity (include age groups, grade levels, and schools)?: |
| **Please state the Goals and Objectives of the Activity/Activities to be Funded:** |
| * Use bullet points please
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| **Will Grant Funds be used to** **purchase books and/or other supplies? If yes, please itemize below:** |
| * Use bullet points please
 |
| **Will Grant Funds be used to purchase tools and/or equipment? If yes, please itemize below:** |
| * Use bullet points please
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| **Will Grant Funds be used to train teachers and/or other specialist? If yes, please outline the type of training and individuals to be trained below:** |
| * Use bullet points please
 |
| **Please list other items to be funded:** |
| * Use bullet points please
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| **If possible, please give at least one example of past success using the tool, training etc. to be funded.** |
| * Use bullet points please
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I hereby verify that the information provided is accurate and honest to the best of my knowledge.

Authorizing signature (Authorized Contact): Date: