

Belvedere Community Foundation Grant Application

Date submitted: _____

Organization Name: _____

Project Name: _____

Amount of grant request: _____

Dates of proposed grant period: _____

Contact Name: _____

Title: _____

Mailing address: _____

Phone: _____

Email: _____

Website (if you have one): _____

Tax ID Number (if you have one): _____

Description of project including a brief organization overview if new to the Belvedere Community Foundation:

Timeline for completion: _____

Total Budget for Project including line item breakdown of revenue and expenses:

List of committed, pending and proposed funders for the proposed project:

Include or attach a list of your Board of Directors:

After completion of this project, what additional funding needs are required for continuing community benefit?
