

**J. FORD CRANDALL MEMORIAL FOUNDATION  
APPLICATION FOR GRANT**

Date of Application \_\_\_\_\_

Legal Name of Organization Applying:

\_\_\_\_\_  
(Should be the same as on IRS determination letter as used on IRS Form 990)

Year Founded: \_\_\_\_\_ Current Annual Operating Budget: \$ \_\_\_\_\_

Are you currently receiving United Way Program Funding?       Yes       No

If so, identify programs and amount:

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

Contact Person Title (if different from Executive Director) \_\_\_\_\_

Address (principal/administrative office) \_\_\_\_\_

\_\_\_\_\_

Mailing address (if different from above) \_\_\_\_\_

\_\_\_\_\_

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Project Name: \_\_\_\_\_

Purpose of Grant (one sentence): \_\_\_\_\_

\_\_\_\_\_

Beginning and Ending Dates of the Project/Campaign \_\_\_\_\_

Amount Requested: \$ \_\_\_\_\_ Total Project Cost: \$ \_\_\_\_\_

Signature:

Board of Directors Chairperson \_\_\_\_\_ Date \_\_\_\_\_

Organization Information:

Name and Address: \_\_\_\_\_  
\_\_\_\_\_

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Chief Staff Officer: \_\_\_\_\_ Phone No. \_\_\_\_\_

Contact Person/Title: \_\_\_\_\_ Phone No. \_\_\_\_\_

Board Chairperson: \_\_\_\_\_

Please submit a list of Trustees or Directors.

Has the governing board approved a policy which states that the organization does not discriminate as to age, race, religion, sex or national origin?  Yes  No

If no, please explain: \_\_\_\_\_  
\_\_\_\_\_

Has this request been authorized by the organization's governing body:  Yes  No

This application must be signed by an officer of the organization's governing body:

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

### **Project/Program Abstract (5 pages maximum)**

Brief summary of the proposed project/program including:

- ▶ statement of problem to be addressed
- ▶ project/program outcome and strategy for achieving them
- ▶ total estimated costs
- ▶ amount requested from this funder and how the funds will be used
- ▶ other principal sources of support

### **Organization Information**

Brief summary of the organization's:

- ▶ mission, goals and major accomplishments
- ▶ description of the population served incl total number & other important characteristics
- ▶ principal geographic area served

### **Project/Program Description**

Specify project/program outcomes that you plan to achieve.

Who and how many will be served, why are you serving them and why would they use your particular services?

What geographic area does this project/program target?

How will you reach the population you plan to serve?

How will you know if you have achieved the outcomes proposed (how will program be tracked and outcomes measured)?

The Foundation must receive regular reports relative to the use of grant funds. Please describe proposed reporting procedure.

**PLEASE SEND ORIGINAL WITH FOUR (4) COPIES OF PACKAGE:**

**J. FORD CRANDALL FOUNDATION  
15723 MAHONING AVE. STE. B  
DIAMOND, OHIO 44412**