

PICKAWAY COUNTY COMMUNITY FOUNDATION
Application for Grant Funding

- Please type or print legibly
- Return completed application to: PCCF, 770 N. Court Street, Circleville, OH 43113
- Direct questions to 740-477-6207

ORGANIZATION NAME: _____	DATE: _____
ORGANIZATION CONTACT: _____	TITLE: _____
ADDRESS: _____	
<small>(STREET)</small>	<small>(CITY)</small>
<small>(STATE)</small>	<small>(ZIP CODE)</small>
PHONE: _____	EMAIL: _____
MISSION STATEMENT of Organization: _____	

TAX EXEMPT STATUS – 501(c)(3): <i>Circle one</i> YES NO FEDERAL TAX ID #: _____	

I certify that the information provided in this application is true to best of my knowledge.

(Printed Name of Organization Contact)

(Printed Name of Project Chairperson)

(Signature of Organization Contact)

(Signature of Project Chairperson)

(Date)

(Date)

PROJECT NAME: _____

PROJECT CHAIRPERSON: _____

PHONE: _____ EMAIL: _____

TOTAL COST OF PROGRAM: \$ _____ AMOUNT REQUESTED: \$ _____

ESTIMATED TIME PERIOD/DURATION OF PROJECT: _____

Attach the following to the application:

1. A one page, double spaced, summary of the proposed project.
2. Proposed Project Budget showing all sources of income and expenses.
3. Organization's Budget
4. List of all Board members for the organization.

GOAL OF PROJECT: (What do you expect to achieve? What is the long-term difference to Pickaway County?)

EVIDENCE of NEED for the Project: (Provide information on the problem you intend to address with this program and why. Include in bulleted format specific data and local statistics that support your case. Include sources.)

Please include statistics, specifics, and descriptions for each section below.

INPUTS: (Describe the resources you will dedicate to or use for this program. Examples include staff, volunteers, equipment, facilities, money, etc. Consider sharing the constraints as well.)

ACTIVITIES/SERVICES: (Describe in detail what the program does or will do with the inputs to reach its goal. Examples include sheltering, building, mentoring, promoting, educating, etc.)

OUTPUTS: (Describe what happens because of the program's activities. Ask yourself "how many?" Examples include number of classes taught, sessions conducted, materials distributed, participants served, service hours provided, etc.)

OUTCOMES: (Describe the measurable benefits to participants during and after program activities; define what constitutes success of the program. Answer what is obtained or results from the program. Reiterate what the goal was and how meeting the goal will be defined. Examples include increased skills, changed attitudes, improved conditions, modified behavior, etc. Provide samples of measurement tools – survey, test results, etc. – if applicable.)

TARGET POPULATION: (Describe in detail the demographics for this program. Who are you targeting? Who benefits from the program?)
