

Please provide the following information in this order. Use these headings, subheadings and numbers provided in your own word processing format, leaving flexibility for length of responses.

A. Narrative

1. Executive Summary

- Explain briefly, in one page or less, why your organization is requesting this grant, what outcomes are desired and how the grant will be spent.

2. Purpose of Grant

- State the need or problem that the grant will address; describe the target population and the benefit they will receive
- Describe the project goals, measurable objectives, action plans and state whether this is a new or ongoing part of the organization
- Define the timetable for implementation
- List other partners in the project and describe their roles
- Acknowledge similar, existing projects or agencies, if any, and explain how your agency or proposal differs and efforts being made to work cooperatively
- Describe the qualifications of key staff/volunteers that will ensure the success of the program. Define any specific staff training needs for this project
- Describe the long term strategies for funding of this project

3. Evaluation

- How will success of the project/program be defined and measured
- How will evaluation results be used and disseminated, and, if appropriate, how will the project be replicated
- Describe how the constituents will be involved in the evaluation

4. Budget Narrative/Justification

- Use the Grant Budget Format that follows
- On a separate sheet, explain how each budget item relates to the project and how the budgeted amount was calculated
- List amounts requested of other foundations, corporations and other funding sources for the support of this proposal
- If we are unable to meet your full request, please indicate priority items in the proposed budget

5. Organization Information

- Provide a brief summary of the organization's history
- State the organization's mission and goals
- Describe current programs, activities and accomplishments
- Provide an organizational chart including board, staff and volunteer involvement

B. Attachments

1. Copy of current IRS determination letter indicating 501 (C) (3) tax exempt status
2. Board of Directors with affiliations
3. Finances
 - Current operating budget, including expenses and revenue
 - Most recent financial statement (independently audited, if available; if not then attach Form 990)
4. Letters of Support – 2 to 3, verifying need for project and collaboration with other organizations (optional)
5. Annual Report, if available



Grant Application Cover Sheet

Date of Application: _____

Legal name of organization applying: _____
(Should be same as IRS determination letter and as noted on IRS Form 990)

EIN #: _____

Year Founded: _____

Current Operation Budget: _____

Executive Director: _____

Phone #: _____

Email address: _____

Contact Person/Title/Phone #: _____
(if different from Executive Director)

Address(administrative offices): _____

City, State, Zip: _____

Fax Number: _____ Email address: _____

List any previous support from the Dawn Foods Foundation in last 2 years:

Project Name: _____

Purpose of Grant (one sentence): _____

Desired Project Outcome/Measurables: _____

Dates of Project: _____ Amount Requested: _____

Total Project Cost: _____

Will you accept partial funding? _____

Geographic Area/Population Served: _____

Signature, Chair, Board of Directors

Print Name

Date

Signature, Executive Director

Print Name

Date

Grant Budget Form

Below is a listing of standard budget items. Please provide the project budget in this format and in this order.

- A. Organizational fiscal year: _____
- B. Time period this budget covers: _____
- C. For a capital request, substitute your format for listing expenses. These will likely include: architectural fees, land/building purchase, construction costs, and campaign expenses.
- D. Expenses: include a description and the total amount for each of the following budget categories, in this order:

	<u>Amount requested from Dawn Foods Foundation</u>	<u>Total Project Expenses</u>
Salaries	\$ _____	\$ _____
Payroll Taxes	\$ _____	\$ _____
Fringe Benefits	\$ _____	\$ _____
Consultant/Professional Fees	\$ _____	\$ _____
Insurance	\$ _____	\$ _____
Travel	\$ _____	\$ _____
Equipment	\$ _____	\$ _____
Supplies	\$ _____	\$ _____
Printing/Copying	\$ _____	\$ _____
Telephone/Fax	\$ _____	\$ _____
Postage/Delivery	\$ _____	\$ _____
Rent	\$ _____	\$ _____
Utilities	\$ _____	\$ _____
Maintenance	\$ _____	\$ _____
Evaluation	\$ _____	\$ _____
Marketing	\$ _____	\$ _____
Other (please specify)	\$ _____	\$ _____
Total Amount Requested	\$ _____	\$ _____

- E. Revenue: include a description and the total amount for each of the following budget categories, in this order; please indicate which sources of revenue are committed and which are pending.

	<u>Committed</u>	<u>Pending</u>
1. Grants/Contracts/Contributions	\$ _____	\$ _____
Local Government	\$ _____	\$ _____
Foundations (itemize)	\$ _____	\$ _____
State Government	\$ _____	\$ _____
Federal Government	\$ _____	\$ _____
Corporations (itemize)	\$ _____	\$ _____
Other (specify)	\$ _____	\$ _____
2. Earned Income		
Events	\$ _____	\$ _____
Publications and Products	\$ _____	\$ _____
3. Membership Income	\$ _____	\$ _____
4. In-Kind Support	\$ _____	\$ _____
5. Other (specify)	\$ _____	\$ _____
Total Revenue	\$ _____	\$ _____