

# APPLICATION FORM

(MUST BE COPIED IN THIS FORMAT AND REMAIN 2 PAGES)

Please check off the items on the list below and return this two page application form with all items attached. If any item is omitted or copies of everything are not received, then consideration will be delayed.

- (20 copies)** Of this **two-page** Application Form. All questions must be answered.
- (20 copies)** A **one-page** cover letter.
- (1 copy)** A **one-page**, line-item budget identifying the projected income and expenses of the organization and the program or project.
- (1 copy)** IRS Tax Determination Letter of tax exempt status.
- (1 copy)** Most recent annual report and financial statement.

Name of Organization as it appears on IRS Tax Determination Letter: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Tax ID Number: \_\_\_\_\_  
(Must be number of organization listed above)

Chief Administrative Officer and Title: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Total current assets (market value) of organization: \$ \_\_\_\_\_

Total current endowments: \$ \_\_\_\_\_

Total current fund balance: \$ \_\_\_\_\_

Date of incorporation: \_\_\_\_\_

Total expenditures for the last three years:

20\_\_ \$ \_\_\_\_\_

20\_\_ \$ \_\_\_\_\_

20\_\_ \$ \_\_\_\_\_

Date of organization's last outside and/or qualified audit: \_\_\_\_\_

## ABOUT THE PROGRAM / PROJECT

### GENERAL INFORMATION

Program / Project Title: \_\_\_\_\_  
\_\_\_\_\_

Amount Requested from the Degenstein Foundation: \$ \_\_\_\_\_

Purpose of the program / project: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Beginning and ending dates of the program / project:

\_\_\_\_\_ to \_\_\_\_\_

Date for which funding is requested:

\_\_\_\_\_ to \_\_\_\_\_

Program / Project director's name title:

\_\_\_\_\_

Total program / project budget \$ \_\_\_\_\_

Past funding from the Degenstein Foundation for this program / project or to organization:

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

Potential Funding from other sources (public or private should be listed): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How much money was received to date for the program / project? \$ \_\_\_\_\_

Future funding (if program / project is to continue beyond the grant period, what are the plans for funding this program / project upon expenditure of this grant?)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

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### **PROPOSAL / PROJECT SUMMARY**

Please summarize the need for the program / project and how the program / project seeks to meet the need. Describe how success will be measured.

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\_\_\_\_\_  
Signature of Chairman or Executive Officer

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date