CHARITABLE OUTREACH

LETTER OF INQUIRY

ORGANIZATION AND PRIMARY CONTACT INFORMATION

ORGANIZATION

ORGANIZATION NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

WEB ADDRESS: _____

PHONE NUMBER (XXX) XXX - XXXX: _____

PRIMARY CONTACT (Designated as the primary contact by the Foundation for questions or follow-up relating to letter of inquiry.)

PREFIX: _____

NAME: _____

JOB TITLE: _____

EMAIL ADDRESS: _____

PHONE NUMBER (XXX) XXX - XXXX: _____

TAX STATUS INFORMATION

LEGAL NAME OF APPLICANT ORGANIZATION: _____

TAX STATUS: _____

TAX ID NUMBER: _____

TAX REGISTRATION DATE: _____

YEAR ORGANIZATION FOUNDED: _____

CHARITABLE OUTREACH

LETTER OF INQUIRY

ORGANIZATION BACKGROUND

ORGANIZATION HISTORY: _____

ORGANIZATION MISSION: _____

PRIMARY ORGANIZATION ACTIVITIES: _____

NUMBER PEOPLE SERVED LAST YEAR: _____

BOARD MEMBERS (NAMES/POSITIONS): _____

ORGANIZATION BUDGET SIZE:

ENDING DATE MOST RECENT COMPLETED FISCAL YEAR (MM/DD/YYYY): _____

CURRENT OR AUDITED FINANCIALS (AUDITED PREFERRED. MAY BE ATTACHED.): _____

PROFIT/LOSS STATEMENT (MAY BE ATTACHED.): _____

TOTAL EXPENSES (MOST RECENT COMPLETED FISCAL YEAR): _____

HAS THERE BEEN AN OPERATING DEFICIT WITHIN LAST 3 YEARS?

YES, PLEASE EXPLAIN: _____

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PROJECT DESIGN AND LOGISTICS

PROJECT DESIGN

PROJECT TITLE (10 WORDS OR LESS):

PROJECT DESCRIPTION (Explain the project purpose, activities needed to accomplish the project, and what the organization has done to prepare for the project. Limit your response to 1,000 words or less.):

QUALIFICATIONS OF PROJECT LEADERSHIP (Describe relevant experience and attributes of project leaders):

WHAT WILL FOUNDATION FUNDS BE USED FOR:

PROJECT LOGISTICS

PROPOSED PROJECT START DATE: END DATE:

GEOGRAPHICAL AREA PROJECT WILL SERVE:

NUMBER OF PEOPLE PROJECT WILL SERVE:

DESCRIPTION OF TARGET POPULATION TO BE SERVED:

PROJECT BUDGET, OUTCOMES & ALIGNMENT WITH FOUNDATION PRIORITIES

TOTAL PROJECT BUDGET ($X,XXX): _____

TOTAL AMOUNT REQUESTED FROM FOUNDATION ($X,XXX. Include what percentage the request is of overall operating budget): _____

AMOUNT RAISED TO DATE (Including commitment of applicant funds. List sources of amounts raised): _____

HOW WILL REMAINING FUNDS BE RAISED? _____

HOW WILL PROJECT BE FINANCIALLY SUSTAINED AFTER THE FOUNDATION GRANT ENDS?

PROJECT OUTCOMES AND ALIGNMENT WITH FOUNDATION PRIORITIES

HOW DOES PROJECT ADVANCE THE FOUNDATION'S GOALS FOR THIS ISSUE OR AREA?

HOW WILL THE PROJECT BENEFIT THE COMMUNITY/CLIENTS? _____

WHAT SPECIFIC MEASURABLE OUTCOMES WILL RESULT FROM THE PROJECT? _____

HOW WILL PROJECT OUTCOMES BE EVALUATED OR ASSESSED? _____