SCRIBNER AREA COMMUNITY FOUNDATION, INC.

GRANT APPLICATION FORM

Legal Name of Organization:	<u> </u>	
Address:		
City:	State:	Zip
Website (if available):		
Contact Name and Title:		
Telephone Number:	Fax Number:	
Email Address:		
Year Organization was Founded:	Current Year O	perating Budget: \$
Number of Volunteers:	Paid Staff	Other:
Name of Project:		
Start <u>Date:</u>	End Date:	
Proposed number of people direct	ly served by the project:	
Dodge County	Othe	r County:
Please list the communities where	e this project will take pla	ce:
Scribner Area Community Found	ation Interest Area:	
EducationArts & Culture(Civic ImprovementSoci	al ServicesHealth & Recreation
Request Amount \$	Total	l Project Cost \$
One Paragraph summary of purp	ose and amount of request	