



GRANT APPLICATION
PART I, SUMMARY SHEET

PROFILE INFORMATION

Organization Name:		
Address:		
Contact Name & Title:		
Telephone:	Fax:	Email:

(The CarolinaEast Foundation does not fund salaries, events, indirect & promotional expenses)

HEALTH-RELATED PROJECT DESCRIPTION

Project Title:	
Statement Of Project's Health-Related Purpose:	
Geographic Area To Be Served:	
Number of People To Be Served:	
Type of request: <input type="checkbox"/> New Program <input type="checkbox"/> One-Time Request <input type="checkbox"/> Equipment Funding	
Project Start Date:	Project End Date:
Total Project Cost:	
Amount Requested From CarolinaEast Foundation:	
Other Pledges/Funding Commitments To Date: Amount:	Source:
Other Funding Sources (And Amounts) Applied To For Project:	

Signature: _____ Date: _____

Title: _____

ATTACHMENTS:

In addition to this application, please attach the following:

- | | |
|---|---|
| 1) A cover letter on the organization's letterhead | 4) List of current officers, board members and staff |
| 2) 501-c-3 determination from the IRS | 5) Brochure(s) or marketing materials, as appropriate |
| 3) Current financial statements for the organization
(preferably audited statements) | |



GRANT APPLICATION
PART II, NARRATIVE
(Please limit your responses to the space provided.)

A. Provide a brief statement on the background of the organization:

B. Describe the specific health-related purpose for which the funds are requested and the need for the project in the community, identifying and quantifying the proposed beneficiaries of the project.



GRANT APPLICATION
PART II, NARRATIVE (continued)

C. Outline the goals of the project and the strategy to accomplish those goals. Include a timeline for accomplishing these goals.

D. Describe **how, when and by whom** the project's effectiveness will be measured.



GRANT APPLICATION
PART III, BUDGET FORM

1. Develop a complete project/program budget, including income and expenses, for the period for which you are requesting funds. If you need to summarize on this page because of space limitations, please enclose the budget details to support the summary.

Note: Income and expenses must balance.

*The Foundation does not fund salaries, events, indirect & promotional expenses.

Expenses (By categories)

Income (By Source)

--	--

2. Please detail how specifically how Carolina East Foundation dollars for this project will be spent.