

Grant Application

CHECKLIST

The ViaPath Foundation application consists of the following components, which should be submitted in the order listed below. This checklist is provided to help ensure a complete proposal and does not need to be submitted with the proposal. **Please return your completed application to info@viapath-foundation.org for consideration.**

Section I: Cover Letter (one page)

Include the purpose of the grant request and a brief description of how the request fits with the Foundation's mission and grantmaking priorities.

Section II: Summary Sheet Form

Use the two-page template provided.

Section III: Narrative

Narrative Questions

- Organization Background and goals
- Program or project request
- Evaluation expectations
- Opportunity for collaboration
- Inclusiveness
- Volunteer opportunities (if any)

Attachments

Financial Attachments

- Current year organization budget
- Program or project budget, if applicable
- Most recent year-end financial statements, audited or otherwise
- Most recently filed 990 tax form

- List of current or recent major contributors
- Explanation of items in financial attachments, if applicable

Other Attachments

- Proof of IRS federal tax-exempt status
- Anti-discrimination statement adopted by the board of directors
- Annual report, if available
- Evaluation results (optional): Provide the organization's most recent project or organizational evaluation results, relevant to this request.

Thank you for your time and effort in completing this application.

SUMMARY SHEET FORM

Legal Name of Organization:

DBA (if applicable):

Mailing Address (and Physical Address if it is different and not confidential):

Phone:

Fax:

EIN:

Website:

Organization Email Address:

Name of CEO or Executive Director:

Phone:

Email:

Application Contact & Title (if not the CEO or Executive Director):

Phone:

Email:

Organization Information

Year Founded:

Mission Statement:

Geographic Area Served (specific to this proposal):

Tax Exemption Status:

- 501(c)(3)
- Using a fiscal agent/fiscal sponsor

Name of fiscal agent/sponsor:

Other than 501(c)(3), describe:

Number of Employees: Full-time:

Part-time:

Grant Request Information

Type of Grant Requested (select one):

Amount of Request:

General Operating Support

Program or Project Support

Name of Program or Project:

Describe what the grant will be used for:

Financial Information

Organization's Current Budget for Fiscal Year Ending:

Income:

Expenses:

If other than a general operating request:

Program or Project Budget:

Dates: from:

to:

Income:

Expenses:

By signing below, I certify that the information contained in this application is true and correct to the best of my knowledge.

CEO/Executive Director

Date