

# LEVIN FAMILY FOUNDATION GRANT APPLICATION

**ALL SPACES ON THIS PAGE MUST BE FILLED AND ALL SIGNATURES ARE REQUIRED**

## Section One

### Organization Data

Applicant Organization (Legal Name): \_\_\_\_\_  
Doing Business As: \_\_\_\_\_  
Previous Name, if changed: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_  
E-mail: \_\_\_\_\_ Web site: \_\_\_\_\_  
Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_  
IRS Name, as listed on 501(c)(3) letter: \_\_\_\_\_  
IRS letter date: / / Tax Exempt ID number (EIN): \_\_\_\_\_  
Executive Director: \_\_\_\_\_ Direct Phone: ( ) \_\_\_\_\_  
Organization's Budget: \$ \_\_\_\_\_ Endowment Size: \$ \_\_\_\_\_  
Organization's Major Funding Sources: \_\_\_\_\_

### Organization's Affiliation and/or accreditation body (check all that apply)

United Way \_\_\_\_\_  Fine Arts Fund \_\_\_\_\_  Better Business Bureau \_\_\_\_\_  
 Chapter of national or regional organization \_\_\_\_\_  
 Other (Specify) \_\_\_\_\_

### Request Data

Program/Project Title: \_\_\_\_\_  
Amount of this request: \$ \_\_\_\_\_ Total Budget for this Program/Project: \$ \_\_\_\_\_  
Proposal contact person information: Name \_\_\_\_\_  
Title \_\_\_\_\_ Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_  
E-mail \_\_\_\_\_

Community/Counties served by this Program/Project: \_\_\_\_\_

Projected number of people to be served by Program/Project \_\_\_\_\_

Brief demographic description of population served by this Program/Project: \_\_\_\_\_

Type of request (check all that apply)

Capital \_\_\_\_\_  Program/Project \_\_\_\_\_  Endowment \_\_\_\_\_  
 Operating \_\_\_\_\_  Technical Assistance \_\_\_\_\_  Start-up \_\_\_\_\_

Signature of Executive Director: \_\_\_\_\_ /

Printed Name \_\_\_\_\_ (date)

Signature of Board President: \_\_\_\_\_ /

Printed Name \_\_\_\_\_ (date)

**EXECUTIVE SUMMARY – 1 Page Only (MUST BE TYPED)**

**What is the project you're applying for?**

**How much are you applying for and how will it be used?**

**Who else has committed to funding? Please list organization name, contact person and phone number:**