

LEXINGTON COMMUNITY FOUNDATION GRANT APPLICATION

Organization Name:

Mailing Address:

E-mail Address:

Phone:

Contact Name:

Title/Position:

Project Title:

Anticipated total cost:

Anticipated funding period:

Amount requested from Lexington Community Foundation:

Regular source of income:

To what other sources have you applied for funds:

Total organization budget:

DETAILS OF PROJECT – In a narrative statement, limited to no more than 2 pages, please address the following:

1. PROJECT STATEMENT - Describe your program/project. What benefits will be derived by the community?
2. STATEMENT OF NEED - Why should LCF consideration be given to this program/project? How does this program/project fit our criteria for funding?
3. IMPLEMENTATION - How will the program/project be accomplished? Who, when, where, etc.
4. SIZE AND DURATION - How many people will be affected by the program/project? How long?
5. MEASUREMENT OF SUCCESS - How will the success of this program/project be measured?
6. CONTINUATION - Will the program/project require on-going funding? If so, by whom?

THE FOLLOWING INFORMATION MUST ACCOMPANY THIS APPLICATION

- List of board members
- Key staff / volunteer positions
- General financial information, including principle sources and amounts of ongoing annual support
- **Complete program / project budget and timeline**
- 501(c)(3) tax-exempt letter or evidence of government agency status under section 170(c) (if applicable)