









# GRANT APPLICATION COVER

Please complete the Grant Application Cover and Agreement Page. The Cover and the Agreement Pages are to be pages one (1) and two (2) of your proposal. Print or type only. Submit the original proposal and 18 copies to:

**Wabash Valley Community Foundation, Inc.**  
2901 Ohio Blvd., Suite 153  
Terre Haute, IN 47803

DO NOT USE STAPLES OR PLACE IN BINDERS OR COVERS. USE ONLY PAPER CLIPS.

Name of Organization \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Contact Person \_\_\_\_\_ E-mail address \_\_\_\_\_

Title \_\_\_\_\_ Telephone \_\_\_\_\_

Project Title \_\_\_\_\_

Amount Requested \$ \_\_\_\_\_ Total Project Cost \$ \_\_\_\_\_

Indicate the county you are applying to       Sullivan County       Vigo County

Please provide a 25-word summary of your grant proposal. Please include a more thorough description in your packet as outlined in the instructions.

\_\_\_\_\_  
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<b>FOR FOUNDATION USE ONLY</b>		Date Received: _____
Application Packet Contains:		County: <input type="checkbox"/> Sullivan <input type="checkbox"/> Vigo
_____ 1. Application Cover & Agreement Page	_____ 7. Timetable	
_____ 2. Organization background	_____ 8. Project budget	
_____ 3. Proposed program	_____ 9. Agency budget	
_____ 4. Program methods	_____ 10. Governing organization	
_____ 5. Evaluation	_____ 11. Financial statement / balance sheet / audit	
_____ 6. Funding the program	_____ 12. Evidence of 501(c)(3) tax-exempt status	



## AGREEMENT PAGE

Please complete this form and have the appropriate individuals sign. The Agreement Page should be page 2 of your grant proposal.

Name of Organization \_\_\_\_\_

Telephone Number \_\_\_\_\_

Project Title \_\_\_\_\_

If the organization listed above is awarded this grant, in full or in part, the undersigned as authorized representatives of our organization, agree to acknowledge and recognize the support of the Wabash Valley Community Foundation, and/or its affiliate, the Sullivan County Community Foundation, in this project in all announcements and written materials. As an officer and/or employee of this organization/institution, we further agree for the organization to send the Community Foundation copies of announcements, including newspaper, newsletter and magazine articles related to this project.

Further as an authorized representative is this organization, we agree to:

1. See that the funds are used solely for the stated purpose
2. Have the organization repay any portion of the amount which is not used for the purpose of the grant
3. Return any unexpended funds if our organization/institution loses the Determination of its 501(c)(3) status as granted by the Internal Revenue Service
4. Submit a final report thirty (30) days after the completion of this project. We understand that our organization's failure to submit its final report will preclude it from applying for future grants from the Community Foundation.

Chief Executive Officer/Executive Director

Chief Volunteer Officer

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

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Name typed

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Name typed

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