



COMMUNITY GROUP FUNDING PROGRAM  
**PROJECT APPLICATION**

Application Date: \_\_\_\_\_

Name of Community Group: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Work Phone Number: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_

Community Group Mailing Address: \_\_\_\_\_

Non-profit status, if known: \_\_\_\_\_

**PROJECT**

Name of Project: \_\_\_\_\_

Project Start Date: \_\_\_\_\_ Project Completion Date: \_\_\_\_\_

Description of Project: \_\_\_\_\_

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Who will the Project benefit: \_\_\_\_\_

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Individual(s) responsible for managing/supervising the Project: \_\_\_\_\_

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Necessary approvals from other agencies, if required: \_\_\_\_\_

**FUNDING**

**Volunteer Hours**

Estimate of volunteer hours by task: \_\_\_\_\_

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Total # Hours: \_\_\_\_\_ x \$8/hour = \$ \_\_\_\_\_

**Materials**

Detailed budget for materials:

Description	Amount
Total "Materials" Budget	

Grant Amount Request: \$ \_\_\_\_\_ (Volunteer Hours + Materials)

Total Project Budget: \$ \_\_\_\_\_

Non-Agency Funding Source(s): \_\_\_\_\_

**COMMUNITY BENEFIT**

How will the funds received by your group for volunteer hours be utilized in the community?

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