

Beaudoin Family Grant Application**Organization Information**

General Information

Organization Name

Federal Tax ID

Federal Tax ID numbers are 9 digit numbers with a dash after the first 2.

Tax Status

- Select One -

Address

City State

- Select One -

Zip Code

Website Address

Background Information

Mission Statement

Brief History of the Organization

Contact Information

Organization Primary Contact- Please enter name and contact information for President, CEO, Director, etc.

Prefix First Name

- Select One -

Last Name

Title
Office Phone
Extension
E-mail

Request Primary Contact- Please enter name and contact information for person submitting this application.	
Same as Organization Primary Contact	
No	
Prefix	First Name
- Select One -	
Last Name	
Title	
Office Phone	
Extension	
E-mail	

Request Information

Request Information
Request Amount
Funding requested from HMF Beaudoin Family Foundation.

Area of Interest

Please select all that apply.

Program Description

Briefly explain the area of interest, need or development to be addressed by this grant. Explanatory documents may be attached below.

Explanatory documents

Please attach any documentation that will address the above question.

Funding Impact

How will the funding requested impact the issue which you are presenting?

Other Funding

What other sources of funds are available or being sought? (Coordination of funding efforts is valued.)

Use of Funds/Outcomes

Give a brief description of how the requested funds will be used and what outcomes are expected through the use of these funds.

Goals

What are the short and long-term goals of this program, project or activity?

Organization Operating Budget

Please upload a summary budget for your organization for the fiscal year for which these funds are requested.

Plans for program sustainability

Looking forward, what plans do you have for future funding for this endeavor?