

Grant Application

Murray & Agnes Seasongood Good Government Foundation

Section 1

Name of Applicant:

Secondary Phone:

Address:

E-mail:

Primary Phone:

Fax:

Project Director (Name and Title):

Section 2

Proposal Title:

Section 3

How does this project meet Seasongood Foundation purposes?

Section 4

Is your project: Public ___ Private ___ Non-Profit ___ For-Profit ___ Individual ___

Which 501(c)(3) organization has agreed to receive the grant?

Section 5

Please provide a brief statement of your organization's mission.

Section 6

Please describe the primary purpose of this project and how it will be achieved. If you want to supply additional information, you may attach up to three supplemental pages.

Section 7

Which group(s) or population(s) will benefit directly from this project?

Section 8

If a consultant is included in your proposal, please describe that person's exact role in the project.

- *If the consultant is compensated through other sources of funding, please identify those sources:*
- *What are the exact financial terms of the engagement of the consultant?*

Section 9

Has this project already been advanced beyond the preliminary planning stages? If yes, please explain.

Section 10

What are the anticipated start and completion dates of the project?

Section 11

What is the plan to evaluate the project? Please be sure to discuss how you will measure outcomes and/or success. If you have begun to evaluate the project, please provide some key outcome measures in this response.

Section 12

Please attach a list of names of your organization's board members, if applicable.

Section 13

Are you seeking funds from other organizations for this project? If yes, please list all other funders to whom this current proposal has been and will be submitted. For each funder listed, please indicate the amount requested and the status of the request (e.g. "to be submitted," "pending," "funded," or "declined"). If funded, specify the grant amount and date received. You may attach an additional page, if necessary.

Section 14

If the project was operational last year, please include a statement or list of the revenues and expenses for the project. If revenues include grant funds from foundations and other organizations, please list the source and amount of each grant.

Section 16

List the names of your organization's accountant(s) or auditor(s). If your organization does not have an accountant, please explain the reasons.

Section 17

Total funds requested from the Seasingood Foundation: _____

Section 18

Proposed Budget:

BUDGET ITEM

A. Direct Costs

a. *Total Salaries and Wages* _____

i. *Professional* _____

ii. *Clerical* _____

iii. *Employment Benefits* _____

b. *Consultant* _____

c. *Travel* _____

d. *Materials and Supplies* _____

e. *Equipment (Purchase or Rental)* _____

f. *Production* _____

g. *Other (Printing, Reproduction, Audio-Visual)* _____

B. Indirect Costs _____

TOTAL BUDGET

Total Requested from Seasingood Foundation _____

Total requested from other groups _____

Section 19

CERTIFICATION

This applicant certifies to the best of his/her knowledge and belief that the data in this application are true and correct, and the filing of the application has been duly authorized by the governing body of the applicant.

Signature

Date

Typewritten Name and Title

Phone

Finally, you **MUST** include a cover letter and tax exempt information for your organization. Please return this original with (7) copies to: Murray & Agnes Seasingood Good Government Foundation
15 E. 8th Street, Suite 200W, Cincinnati, OH 45202
