**Adams County Community Foundation**

**The Shirley Smith Community Service Award**

**Grant Application**

Name

Age

Address

City, State, Zip

Email

Cell

Okay to Text? Yes or No

1. Describe the community service project.
2. Who is the sponsoring organization/nonprofit behind this project? Please provide the name and contact information for the service project supervisor.
3. What is your motivation for participating in or creating this project?
4. Describe the total cost of this project (or participation fee) and how you are raising the money needed to complete this project.

Applicant Name (Please print)

Applicant Signature

Date

Parent/Guardian Name (if under age 18)

Parent/Guardian Signature

 *February 2021*