



The Fund for Littlestown Grant Proposal Summary

Organization _____

Address _____ EIN _____

_____ Phone _____

Website _____ Organization's general email _____

Contact person _____ Title _____

Contact's email _____ Phone _____

What does your organization do? _____

Geographic area served by organization _____

Population served by organization (number and demographics) _____

Total project budget \$ _____ Grant request \$ _____

Brief description of the project (big picture) _____

What will you do with the grant award? _____

Littlestown residents to benefit (# & description) _____

_____ Initial here to confirm your nondiscrimination policies are consistent with the Community Foundation's [Nondiscrimination Policy on Employment and Grantmaking](#).

CEO/Executive Director (Please Print)

Board Chair (Please Print)

CEO/Executive Director (Signature) Date

Board Chair (Signature) Date

Jan 2024