

# Mid-Shore Community Foundation Grant Application Form

Agency Name:

Address:

City/State/Zip:

Contact Name:

Phone No:

E-Mail Address:

Website:

Title:

Fax No:

Executive Director (if not contact):

Executive Director's E-Mail Address:

## 1. Overview of Agency.

Please describe the overall need addressed and the characteristics of the population served by your agency. Describe the programs you offer and include the number of people served annually. What is unique about your agency and its programs? Please describe any collaboration with other service providers.

## 2. Project Details.

Project Name:

Amount Requested:

Summary of Project (150 words or less that describe the project for potential funders):

Are matching funds available?

Total Project Budget:

Timeline for Project:

Is this a new \_\_\_\_\_ expanded \_\_\_\_\_ or continuing \_\_\_\_\_ program? Please explain.

Purpose of Request:

Describe Client/Issue to be Addressed by Grant:

Number served by this project:

Geography:

Income:

Gender:

Age:

Special Needs of Client:

Please explain benefits to citizens of Caroline, Dorchester, Kent, Queen Anne's and/or Talbot counties:

How will you determine the effectiveness of the project?

How will you recognize the Mid-Shore Community Foundation for their gift?

How will program be supported after the grant expires?

**Please attach the following items to this application form:**

Current Year Financials

IRS tax determination letter (if changed or not on file at MSCF)

List of Board Members

**NOTE: Grant recipients will be required to submit a comprehensive final report on the project or program no later than one year after the grant is awarded.**

Send completed application and attachments to: Mid-Shore Community Foundation  
102 East Dover Street  
Easton, MD 21601