



**Grant Application Form 2021**

Name of Contact \_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_ Telephone \_\_\_\_\_

Organization \_\_\_\_\_ e-mail \_\_\_\_\_

Address \_\_\_\_\_ Project Name \_\_\_\_\_

City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_ Total Budget for Project \_\_\_\_\_

Date of Incorporation \_\_\_\_\_ Amount of Grant Request \_\_\_\_\_

Current Assets of Organization \_\_\_\_\_ Date of Last Audit \_\_\_\_\_

Approval of Executive Officer:  
I approve submission of this grant request. I certify that the organization named above does not discriminate on the basis of race, religion, age, sex or national origin.

\_\_\_\_\_  
Executive Officer Signature/ Date

\_\_\_\_\_  
Executive Officer Name (Print)



Statement of purpose of your organization.

Brief summary of the proposed program.

What are the most urgent needs of your organization?

Specifically, how will the grant funds be used?



What are the specific plans and timetable for the program?

One way that Good Folks promotes itself to potential donors and future members is through endorsements of our grant recipients. Please explain in detail how your agency will promote Good Folks if it should receive funding.

What are your specific plans for funding this program after the Good Folks grant in 2021/2022?



Organization \_\_\_\_\_

Program \_\_\_\_\_ Time Period Covered \_\_\_\_\_

**SECTION ONE- PROGRAM INCOME**

(Check One)

Funding Sources: List each actual and/or anticipated source of funding for THIS PROGRAM ONLY.	Amount of Funds	Funds Committed	Funds Requested

**SECTION TWO- PROGRAM EXPENSES**

Expense Items: List expense items for THIS PROGRAM ONLY.	Amount of Funds	Amount of item to be funded from Good Folks grant.



*This is a checklist for your convenience only. It will help you complete the application process by checking off each section as it is completed. Please attach any additional information or literature that will assist us in understanding the scope of your organization's work.*

- \_\_\_\_\_ 1. Completed Grant Application Summary (page 1) signed by the Executive Officer of your organization.
  
- \_\_\_\_\_ 2. Completed Program Description (pages 2-3)
  
- \_\_\_\_\_ 3. Completed Program Budget (page 4) indicating sources of income and expenses.
  
- \_\_\_\_\_ 4. Please submit a list of your current Board of Directors.
  
- \_\_\_\_\_ 5. Please submit your most recent financial statements, audited if available.
  
- \_\_\_\_\_ 6. Attach a copy of your organization's official notice of tax-exempt status (501 (c) (3) form, etc.) from the IRS. If your organization is exempt as a local unit of a national organization, please attach certification of membership.
  
- \_\_\_\_\_ 7. Attach any additional information that would enhance your proposal.

NOTE: You do not need to place your application in a special binder or notebook. Applications are disassembled and copied during processing.

**PLEASE SEND YOUR COMPLETED APPLICATION PACKAGE TO:**

**GOOD FOLKS of York County  
P.O. Box 11528  
Rock Hill, SC 29731**

Or email the package to: Lora Holladay at: [lholladay@comporium.net](mailto:lholladay@comporium.net)

**If you have questions, please call Lora at (803) 322-1064**

***\*\* Completed applications must be postmarked by July 15, 2021 to be evaluated. \*\****