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| **Application Date:** |  |

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| Grant Application Contact Information | | | |
| **Name:** |  | | |
| **Email address:** |  | **Telephone number:** | (   )   - |

# Organization Information

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| **Organization Name:** | |  | | | | | | |
| **Mailing Address:** | |  | | | | | | |
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| *Your organization must have 501c3 status (nonprofit) or a fiscal sponsor with that status in order to receive a grant.* | | | | | | | | |
| **Organization’s Employer Identification Number** (EIN) | | | |  | | | |
| **Fiscal Sponsor** (if your organization is not a 501c3) | | | |  | | | |
| **Organization’s Mission:** | | |  | | | | | |
| **Financial Information:** *Provide information from your most recent completed fiscal year.* | | | | | | | | |
| **Operating Budget:** | $ | | | |  | |  | |
| **Total Expenses:** | $ | | | | | **Total Revenues:** |  | |

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| Project Description *In this section, describe the project for which you are seeking funding from the Recompense Fund. (740 character limit per item)* | | | |
| **Amount Requested:** | $ | **Total Project Cost**: | $ |
| **Project Overview:** Provide a brief description of your project by completing the following sentence: *We seek funding from the Recompense Fund to...* | | | |
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| **Project Goal:** Describe what you hope to achieve with this project. | | | |
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| **Project Activities:** Describe exactly what you plan to do. Tip: Consider including *who* will participate, *what* exactly you will do, *where* it will be done, and *when* you expect to begin and complete the project. | | | |
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| **Budget Narrative:** Briefly describe how you will use Recompense funding. | | | |
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| **Other Funding Sources:** List any other sources of support you plan to seek for this project.   |  |  | | --- | --- | | **Source** | **Amount** | |  |  | |  |  | |  |  | |  |  | |  |  | | | | |

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| **List your board members:** | | | | |
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| **By signing this applicant form, the applicant hereby indicates agreement with the following terms and conditions:**   1. The information contained in this application and in any attachments is true and correct to the best of your knowledge. 2. Any funds received as a result of this application will be used only for the purpose specified in the award letter. 3. Any funds received as a result of this application will be expended by September first of the year following the award. 4. A report detailing the project status and expenditures from this grant will be submitted by September 1 of the year following the award. | | | | |
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| **Signature** |  | **Title** |  | **Date** |

If you have questions about this application, please contact one of the following:

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| Leila Bisharat | leilabisharat@gmail.com |
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