

## **2022 GRANT APPLICATION**

Grant applications are due by February 1, 2022

Our theme for 2022 is to provide grants to organizations providing services to citizens impacted by the COVID-19 pandemic.

Our focus will be in the areas of food, housing, children and the aged. As in the past we will also support environmental projects.

Applicants should explain how they will support the above focus areas.

## **ORGANIZATION INFORMATION:**

Name of Organization:					
Executive Director or Grant Cont	tact Person:				
Address:		-			
Telephone:	Fax:				
Email:					
Does your organization have an	IRS 501(c)(3) nonprofit status? Yes No				
Federal Tax ID #:	Date organization was founded:	·			
Organization's Mission Statemer	nt:				
,	ganization serves (number of individuals, gender, ages, ethn				

## **EXECUTIVE SUMMARY OF PROJECT/REQUEST:**

Keeping in mind this year's theme attach a summary of how the funds will be used. Include details for the following questions:

what is your goal?				
What action will you take to achieve this goal?				
Who will be served?				
How will you staff this project?				
How will the success of this project be measured?				
How will this project benefit the community?				
PROJECT INFORMATION:				
Project for which funding is requested:				
Type of Project: Operating/General Program Special Project Other				
Grant amount requested:Project Period: from to				
Geographic area served by project:				
Have you received or are you seeking funding from any other sources for this project? Yes: No: If yes, please indicate from whom and amount requested.				
PROJECT SUSTAINABILITY:  Specify your plans for continuing to finance the project at the termination of the grant:				
PROJECT AND ORGANIZATIONAL ORIGINALITY:  Describe how your project meets the following criterial, Innovative, creative, non-redundant services offered by other local agencies:				

<u>AUTH(</u>	<u>ORIZ</u>	ATION:		
Signature of Executive Director/President		of Executive Director/President	Signature of Board Chair or Officer	
Please Print Name and Title		int Name and Title	Please Print Name and Title	
Date: _		<del></del>	Date:	
<u>Requi</u>	<u>red</u>	Attachments:		
	Copy of organization's Giving MarketPlace - Full Profile Report (pdf copy) via the Community Foundation of			
	the	e Lowcountry's Giving MarketPlace website	e. If your organization does not have a listing on the Giving	
	MarketPlace, contact the Community Foundation of the Lowcountry at 843.681.9100 for assistance.			
	Project Budget – Include all sources of revenue and expenses for this program, showing how requested grant funds will be used.			
If you	are ı	unable to provide the Giving MarketPlace	Full Profile Report, the following attachments are required with	
this ap	plica	ation in lieu of the Full Profile Report:		
		Copy of organization's current budget		
		Copy of organization's most recent Form	990	
		Copy of organization's Form 501(c)(3) let	ter from the Internal Revenue Service	
		Copy of most recent Audit for organization for organizations with revenues under \$5	ons with revenues over \$500,000 <u>or</u> a current financial statement 00,000	
		List of organization's current staff and board members		
Grant	арр	olications are due to the address below	by February 1, 2022:	

PDPOA
Attn: Grants Committee
16 Queens Folly Rd.
Hilton Head Island, SC 29928

info@palmettodunescares.org

Questions? Contact Joe Maggi, Grants Committee Chair: maggidj@roadrunner.com or 843-422-0222