



First Federal Charitable Foundation Grant Application

Please type all information

Date	Name of Organization	501(C)(3) Tax Exempt #	United Way Agency (yes or no)
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Amount Requested	Fiscal Year Calendar ____ yes ____ Other _____
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Address (City, State, Zip)

Contact Person	Title	Email Address	Phone Number
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Mission of the Organization

Geographic Area Served	Number of People Served
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Principal Staff Members (paid vs. volunteers)

Please provide an explanation of, and the percentage of, your organization's efforts to benefit low-to-moderate income individuals.

Your application must provide a statistically supported description of the specific need your organization seeks to address and your history of meeting that need. Describe how the grant you seek will be used, leveraged and its effects measured. Address the long-term financial viability of your organization, its future means of support in the community and coordination with other nonprofit or governmental entities. Please feel free to include other attachments of your choosing that contain information you feel is relevant to supporting your grant application.

Provide a statistically supported description of the specific community need your organization seeks to address.

Provide a history of your organization's ability to meet this need.

Describe how the grant you see will be used, leveraged and its effects measured.

Address the long-term financial viability of your organization.

Describe the future means of support in the community for this request and any coordination with other non-profit or governmental entities.

List other attachments relevant to supporting your grant application.