



Livonia Community Foundation (LCF) Grant Application Form

Organization Name	_____	
Address	_____ _____ _____	
Website / Fax number	_____	
Primary contact person	_____	
Name / Title	_____	
Phone number	_____	
Email address	_____	
Additional contact person(s)	_____	
Name / Title	_____	
Phone number	_____	
Email address	_____	
Amount Requested	\$ _____	Program/Project: _____

Requirements: please submit these documents with your application

1. A cover letter that includes the following

- a. Brief introduction of your organization: mission, history and services provided
- b. Number of paid full and part-time employees and size of volunteer staff
- c. Amount of grant requested (LCF grants generally range from \$500 to \$5000)
- d. Explanation of why a grant is needed and what specific goals it will enable your organization to achieve
- e. An itemized budget for the program that would be funded by the LCF grant
- f. Other funding sources for the program
- g. Indication as to whether your organization is applying for or considering applying for State or Federal funds to support the program
- h. Specific population that would be served by the grant requested
- i. How the requested grant would benefit the Livonia community

2. **Your organization's Board of Directors or Trustees**
3. **Statement from IRS confirming your organization's 501(c)(3) status – *if you received a grant from LCF last cycle and your tax exempt status has not changed you do not need to include this item this year***
4. **Financial statements from the most recent year available (please indicate whether they are audited or unaudited) and your current year budget showing forecasted operating revenue, operating expenses and any one-time revenues or expenses**
5. **If you received an LCF grant last grant cycle, provide a brief report as to how you met the goals of the project or program funded (including but not limited to the numbers of Livonia participants served)**
6. **If you have received grants from the LCF over the last five years, please list the amounts, dates, and programs funded**

Optional items to include (you will not be penalized for not including these items)

1. Letters of commendation received by your organization
2. Copies of press releases issued by your organization
3. Media coverage of your organization
4. Copies of awards, pictures or other documents related to your programs
5. Resumes of your staff or key volunteers

Questions regarding your application should be directed to:

Charlie Mahoney 248 474-0905 mahoneyc@prodigy.net or
Kathleen McIntyre 734 542-9323 culliton_mcintyre@ameritech.net

Please mail your original application packet and six (6) copies to:

Livonia Community Foundation
Grant Administrator
33300 Five Mile Road, Suite 105
Livonia MI 48154

Please note that all applications must be **received by 5:00 pm, on January 15th**. The applications and included materials become the property of the Livonia Community Foundation and will not be returned.

33300 Five Mile Road Suite 105
Livonia, Michigan 48154
(734) 793-0692

www.LivoniaCommunityFoundation.org