

AMES AMZALAK MEMORIAL TRUST
GRANT APPLICATION

Date: _____, 20__

1. Name, address and telephone number of your organization:

2. Authorized contact person:
3. Title:
Phone:
Email:
4. Year founded:
5. Approximate number of clients served annually:
6. Board of Directors or Trustees (attach separate sheet or letterhead).
7. Attach copy of most recent IRS letter on your organization's tax-exempt status under Section 501 (c) (3) of the Internal Revenue Code.
NOTE: A state tax-exempt certification does not prove federal tax-exempt status.
8. Attach copy of most recent audited financial statement and accompanying management letter for a complete fiscal year of the organization. If your financial statements have never been audited, indicate why – e.g. you are too small, or your organization is too new.
9. Attach copy of annual report, if available, or a brief description of the scope of your organization's work.
10. Total current annual operating budget: \$
Principal sources and amounts of ongoing annual support:

11. Are you a United Way agency? If so, percentage of your annual budget received through United Way: _____%. If not United Way agency, are you a listed donor option:
_____ yes _____ no

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FOR THIS PROJECT

1. Total cost of specific project: \$ _____
2. Amount requested from Foundation: \$ _____
3. Approximate date funds would be required: _____
4. Anticipated project period: From _____ To _____
5. Project Title and a Brief Description: (there is a space allotted on this form for a detailed description)

6. Geographic area served: _____
7. Client population: _____
8. Number of clients served by project: _____
9. Amount and source of firm funding/commitments to date: _____

Other funding sources (and amounts) applied to for this project and status:

10. Are you familiar with any similar projects in the community? If so, designate organization and location: _____

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PROJECT DETAIL

(Please try to limit your statements in the space provided)

1. Background information, problem statement, project objective – brief background of organization; statement describing the community need; documentation; what you hope to accomplish, when and how you will accomplish the intended results:

2. Project Methodology, Future Funding – describe how the objectives will be accomplished, and what plans there are for obtaining future funding if the project is to continue beyond the current funding period:

3. Community/Volunteer Involvement – describe volunteer opportunities, responsibilities, training, time commitment, etc.:

4. Please attach a detailed project budget. Include administrative costs, salaries (if relevant), project overhead, equipment, travel, rent, other expenses, etc.

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Name:

Title:

Please return completed application to either:

**Justin L. Vigdor, Esq.
Ames Amzalak Memorial Trust
350 Linden Oaks, Suite 310
Rochester, New York 14625-2825
(585) 362-4786**

OR

**Robert M. Vigdor, Esq.
130 East Main Street
Rochester, New York 14604
(585) 324-5763**