



THE EDEN COMMUNITY FOUNDATION, INC.
P.O.Box 96, Eden, New York 14057
716•992•4799
www.edencommunityfoundation.org

GRANT APPLICATION

To complete this application with a word processor, just click in the response area to each question. Limit the length of your response to the space provided. If more space is needed, attach additional pages and be sure to include your group's name on every page. Print the completed form, add attachments, if any, and mail to the Eden Community Foundation ("ECF") at the address above.

Date _____

Name of Entity _____

Address _____

Primary Contact Person _____

Email _____ (work) _____ (home) _____

1. Describe the entity submitting this grant application. Please keep in mind that the grant application must be submitted by the entity that would receive funds, if the grant is awarded. Include mission statement, number of years in existence, names of board members or people in leadership positions, and number of people served.

2. Specify if the entity is an individual, partnership, corporation, municipality, educational institution, religious institution, or other type of group and, if other, please explain.

3. Explain the relationship between the Primary Contact Person shown above and the entity. If the Primary Contact Person is not in a leadership position of the entity (e.g. president, member of board of directors), then attach to this grant application a letter from the entity's leadership stating: (a) the project proposed is approved by the entity; and, (b) the Primary Contact Person has the entity's approval to submit the grant application.

4. Describe your project including the following information: who will benefit, relevance to the Eden community, and expected start and finish date(s). Include site plans, photos, etc., so we can best understand the project.

5. Explain how you will measure the success of this project.

10. Explain how and when the ECF's funds would be used.

11. Please provide any other information that may be helpful to the ECF in assessing your application.

By signing below, I certify that I have the authority to submit this grant application on behalf of the entity specified herein, the entity approves of the project explained herein, and all the information provided in this grant application and all attachments are true and accurate.

Primary Contact Person's Signature

Title