

# The Women's Fund

OF HERKIMER & ONEIDA COUNTIES

## Women's Fund of Herkimer and Oneida Counties

### Grant Application

#### Cover Sheet

Name of Organization: \_\_\_\_\_

Address: \_\_\_\_\_

e-mail address: \_\_\_\_\_

Phone number: \_\_\_\_\_

Executive Director: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Amount of money requested from the Women's Fund: \_\_\_\_\_

Total cost of the program: \_\_\_\_\_

Type of program i.e. (educational, health, job training): \_\_\_\_\_

Number of clients benefitting from the program: \_\_\_\_\_

Age range of clients: \_\_\_\_\_

Targeted geographical area: \_\_\_\_\_

Grant requests must be signed by your Executive Director

## **The Women's Fund Grant Checklist**

### **14 Copies of the following documents:**

- Complete and attach grant application Cover Sheet
- Letter of Intent (not to exceed 2 pages – see guidelines for information to be included)
- Project Budget
- Executive Director Signature on Letter of Intent

### **1 copy of the following documents:**

- Current Board list
- IRS 501 (c)(3) determination letter
- Most Recent Audit
- Supporting documentation (optional – limited to 2 pages)

Grants must be received by Friday September 16, 2016. Grants should be addressed to The Women's Fund, Attn: Grants Committee, 2 William Street, Clinton, NY 13323. We will not accept grants sent by hand-delivery, FAX or e-mail.