

FOUNDATION FOR FREE FLIGHT GRANT APPLICATION

PROJECT NAME:

APPLICANT ORGANIZATION
NAME:

ORGANIZATION ADDRESS:

CONTACT PERSON'S NAME:

CONTACT PERSON'S
ADDRESS:

CONTACT PERSON'S PHONE:

CONTACT PERSON'S FAX:

CONTACT PERSON'S EMAIL:

\$ AMOUNT REQUESTED

PROJECT SUMMARY (1-3 PARAGRAPHS) INCLUDE A. NEEDS / PROBLEM ASSESSMENT, B. PROJECT OBJECTIVES AND METHODS:

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PROPOSED START TIMES AND COMPLETION DATES

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ESTIMATED DATE WHEN FUNDING WILL BE REQUIRED

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DESCRIBE HOW THE USHGF WILL BE ACKNOWLEDGED FOR ITS SUPPORT OF THE PROJECT.

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LIST ANTICIPATED BUDGET FOR THE PROJECT

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LIST OTHER FINANCING SOURCES. STATE WHICH SOURCES ARE COMMITTED, PENDING OR TO BE REQUESTED.

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LIST VOLUNTEER AND PRO BONO SERVICES THAT THE PROJECT IS PLANNING TO UTILIZE. INCLUDE LETTERS OF COMMITMENT FROM PARTNERS AND SERVICE PROVIDERS.

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INDICATE SOURCES OF MATCHING FUNDS.

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IF APPLICABLE, DESCRIBE FNDING AND MAINTENANCE SOUCES THAT THE PROJECT MAY NEED TO OPERATE IN THE FUTURE.

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Name:

Date:

SEND COMPLETED APPLICATIONS VIA EMAIL TO GRANTS@FOUNDATIONFORFREEFLIGHT.ORG
IF ELECTRONIC SUBMISSION IS NOT POSSIBLE, CONTACT YOUR GRANTS PROGRAM ADVOCATE FOR ALTERNATIVE DELIVERY METHODS.