

# HUNTER JAMES BARBER MEMORIAL FUND

## GRANT APPLICATION

Applicant Organization: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

IRS identification number and/or exemption number: \_\_\_\_\_

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

Title: \_\_\_\_\_ Phone #: \_\_\_\_\_

Amount of funds requested: \_\_\_\_\_

Summarize proposed project: \_\_\_\_\_

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**Attach proposal and use the following format. Information should include:**

- Concise history of your organization, including past and present programs and activities.
- Detailed description of the project, including the method of implementation, objectives, timetable and number of people to be served by the grant.
- The names and qualifications of the persons supervising the project.
- Detailed project budget, including income sources and expenditures.
- Plan for continuing the project after Foundation funding ends.
- A statement from organization's governing body authorizing this request and agreeing to complete the project if funded.

**The Grants Committee may ask for additional information, an interview or a site visitation, if necessary.**

\_\_\_\_\_  
Signature of person completing this application

\_\_\_\_\_  
Date

**To discuss your grant request or if you have questions, contact Amy Eyman, Executive Director, Monday through Friday between 9:00 am and 4:00 pm at 740-654-8451.**