



Grant Application Cover Sheet

Name of Organization: _____

Address: _____

Executive Director: _____

Executive Director E-Mail: _____

Contact Person: _____

E-Mail: _____

Phone Number: _____

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 area: Herkimer County Oneida County Herkimer & Oneida Counties

How did you hear about our grants?: _____

Note: Grant requests must be signed by Executive Director.



Grant Checklist

Your application must include:

- Completed grant application cover sheet
- Letter of Intent with Executive Director Signature (not to exceed 2 pages)
- Total Operating Budget of Organization
- Detailed Project Budget
- Current Board Member List
- IRS 501(c)(3) determination letter
- Most recent financial audit, OR, if not required, include IRS 990 and NYS CHAR500
- Supporting documentation (optional; limited to 2 pages)

Grant applications can be made online at www.womensfundhoc.org/how-to-apply.php.

For more information, visit www.womensfundhoc.org, email info@womensfundhoc.org or call (315) 381-3072.

**PLEASE DOUBLE CHECK ALL SUBMISSIONS.
INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.**