



Environmental Concern Inc

All About Wetlands Since 1972



1. Applicant Information

Date

Name of Organization:

Tax Status (i.e., 501c3, local government, public school, etc.): 501c3 Non-Profit

Executive Officer of Requesting Organization

Name:

Title:

Address:

County:

Daytime Phone:

Fax:

Email Address:

Signature: _____

Original Signature required

Project Officer

Name:

Title:

Address:

County:

Daytime Phone:

Fax:

Email Address:

Signature: _____

Original Signature required

2. Grant Information

Amount of funding requested:

Grant period (start date and end date of your project):

Project type: CEPA or Site Designation

3. Project Abstract

In 2 or 3 sentences, provide a brief description of the project.

4. Project Information

Address each question below in the proposal narrative. Total length of narrative not to exceed 5 pages.

A) Project Description: Address these questions as they apply to your project:

- What are the specific objectives of the project?
- What are the steps that will be taken to complete the project (methodology)?
- Is this project an extension of an on-going or recently completed project?
- How does your project meet the goals and criteria of the grant program to which you are applying?
(Go to the Application Instructions of the grant program to which you are applying for description of goals and criteria.)
- Describe your organization's experience in completing similar projects.
- List your project partners and describe what specific roles each partner will play in completing the project.

B) Project Deliverables: List the deliverables expected from this project. If applicable, include the estimated:

C) Project Timeline: Describe the schedule of project implementation. Include the start date, end date, and major milestones.

4. Project Budget

A) Itemized Budget: Using the model below, attach a separate page to outline your entire project budget. List the items, quantity, and price per item. Research prices at the place(s) you will purchase the items before completing the budget.

Budget Item, Quantity, and Price per Item	Grant Funds Requested	Matching Funds or In-Kind Services-- Cite the Source	Total Cost	Justification for Budget Item

TOTAL:				
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B) Matching Contributions: Total of matching funds: \$ _____
 Estimated value of in-kind donations: \$ _____
 Estimated number of volunteer hours: _____

5. Attachments

Organization:

- A. Mission and goals statement;
- B. List of Board of Directors or Trustees (*if available*); and
- C. Letters of support from each partner (*as applicable*)

Financial:

- A. Non-profit IRS determination letter (or a signed copy of your non-profit application filing indicating filing for tax exempt status is in process);
- B. Most recent fiscal year audited financial statement (if an audit is not available, please submit a balance sheet and profit/loss statement from the most recent fiscal year. See attached sample balance sheet)*
- C. Most recent IRS Form 990*

*If your organization has not had an audit or has not been required to file a Form 990, please make a note of this and include with your financial materials. The Form 990 and financial statements should reflect the same fiscal year.

