

HUNTSVILLE/MADISON COUNTY BUILDERS FOUNDATION, INC. GRANT APPLICATION

To be considered for a grant, this application must be completed in its entirety. Feel free to use additional pages as necessary and attach any supporting documents (brochures, pictures, plans, etc.) you wish to be considered by the Foundation Board of Directors.

I. ORGANIZATION INFORMATION:

Organization Name:		
Contact:		
Mailing Address:		
City/State/Zip:		
Physical Address:		
City/State/Zip:		
Telephone Number:		
E-Mail Address:	Web Site Address:	
Mission & Purpose of the Organization:		

Other (list below w/ % of budget) _United **W**ay...... % of budget:_____ State Subsidy...... % of budget: Federal Subsidy...... % of budget:_____ Memberships...... % of budget:____ Legal & Tax Status: Ш. ORGANIZATION STRUCTURE: A. Paid Staff? ____Yes ____No How Many?____ Job Titles: В. Board of Directors Board of Directors?____Yes ____No How many? Method of Selecting Board Members? ____Appointed ____Elected ____Other____ Do Board members receive any type of stipend or salary?___Yes _____No Frequency of Board Meetings? _____Monthly ____Quarterly ____Semi-Annually ____Annually C. Membership Does the organization have members? ____Yes __ No If yes, how much are dues? _____ Total membership:_____ PROJECT INFORMATION: IV. Description of project:

a. Monetary (state amount of funds you are requesting): \$	Huntsville/Madison County Builders Foundation, Inc. Grant Application Page 3	
Project Start Date: Project Completion Date: Estimated overall budget for the project: \$	Problems and issues the proposed project will address:	
Project Start Date: Project Completion Date: Estimated overall budget for the project: \$		
Project Start Date: Project Completion Date: Estimated overall budget for the project: \$		
Project Start Date: Project Completion Date: Estimated overall budget for the project: \$		
Project Start Date: Project Completion Date: Estimated overall budget for the project: \$		
Project Completion Date: Estimated overall budget for the project: \$	List names and qualifications of those persons who will be overse	eeing the project:
Project Completion Date: Estimated overall budget for the project: \$		
Project Completion Date: Estimated overall budget for the project: \$		
a. Monetary (state amount of funds you are requesting): \$	Project Completion Date: Estimated overall budget for the project: \$ (attach	
a. Monetary (state amount of funds you are requesting): \$		
I certify the information contained herein is true and correct. Signature Return to: Huntsville/Madison County Builders Foundation, Inc. 2804 Bob Wallace Avenue Huntsville, Al. 35805		
Return to: Huntsville/Madison County Builders Foundation, Inc. Title Return to: Huntsville/Madison County Builders Foundation, Inc. 2804 Bob Wallace Avenue Huntsville, Al. 35805	•	
Title Huntsville, Al. 35805		County Builders Foundation, Inc.
	Title Date Completed:	

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