

**THE ASSISI FOUNDATION OF MEMPHIS, INC.
GRANT APPLICATION COVER PAGE**

PROJECT TITLE: _____

Person Responsible for Project

Name: _____

Title: _____

Telephone: () - **ext:**

Address: _____

Email: _____

Brief description of the specific purpose for which funds are requested: (10 point font minimum)

Amount Requested: _____

Total to be raised: _____

Name of Applicant Organization: _____

Mailing Address: _____

Telephone: () -

Fax: () -

Website: _____

Type of Organization: **Federal**

Public: Specify _____ **State**

Private Nonprofit **County**

For Profit (General) **City**

Executive Director or President

Name: _____

Title: _____

Telephone: () - **ext:**

Address: _____

Email: _____

Fiscal Year:

From (month) _____ **to (month)** _____

Tax ID # _____

IRS Exemption Classification _____

Geographic Area to be Served: _____

Number of Persons Served Annually: _____

Auditing Firm: _____

Date Last 990 Filed: _____

Date Last Annual Report: _____

Date Last Audited Financial Statement: _____

Governing Officer/Board Chairman

Name: _____

Title: _____

Telephone: () - **ext:**

Address: _____

Email: _____

Please Note: *Applications will not be processed or reviewed if the last two years' IRS Form 990, last two Audited Financial Statements, and letter from IRS Certifying Tax Status are not included.*

Certification and Acceptance: I certify this request has been authorized by the governing body. I certify this organization does not discriminate on the basis of sex, age, race, color, religion, nationality, or handicap. I certify the statements herein are true and complete to the best of my knowledge, and accept the obligation to comply with the terms and conditions if a grant is awarded as the result of this application.

Signature of Executive Director or President

Signature of Governing Officer/Board Chairman

Date: _____

Date: _____