



THE HERBERT BEARMAN FOUNDATION

Full Grant Application Template

** Required for consideration.*

Organization Information *

Organization Name	
Address	
City, State	
Zip Code	
Phone Number	
Federal Tax ID (EIN)	
Web Address	
Mission Statement	

Contact Information – Organization President/Executive Director *

Prefix	
First Name	
Last Name	
Title	
Email	
Office Phone and Extension	

Contact Information – Project Contact *

Prefix	
First Name	
Last Name	
Title	
Email	
Office Phone and Extension	



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Project Title *

25 words or less

Requested Amount *

Project Budget *

Annual Organizational Budget *

Project Start Date *

Project End Date *

***Program/Project Description ***

- *Describe the program/project, including key activities and timeline for implementation. Where applicable, describe the frequency and duration of program activities (for example, the number of program sessions and hours per week or month).*
- *If this is a request for general operating support, provide a description of the programs and services provided by your organization.*
- *Describe the population and, if applicable, the number of people to be served. For example, please specify if the program will focus on certain ages, populations, or neighborhoods.*
- *Cite any relevant research or evidence that supports the program model.*
- *Please list any other funders, partners, or stakeholders involved in this program or project. Include the nature of their involvement (financial, advisory, operational, etc.) and whether funding has been secured or is pending.*



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Statement of Need *

Program/Project Objectives and Outcomes *

- *Please describe how you will know if your program/project is accomplishing what you set out to do.*
- *Describe how you will evaluate the effectiveness of the program/project, including what outcomes you will measure and how you will collect and analyze data.*
- *Please provide past results for these outcomes where available.*

Organizational Background and Capacity *

- *Briefly describe your organization's past performance or accomplishments, if applicable.*
- *Describe the organization's capacity to carry out the program/project, including experience implementing similar programs/projects and partnerships with other organizations.*
- *Identify key staff members involved in the program/project and describe their relevant experience.*

Authorized Signer: _____ *

By typing your name and title above, you are signifying that you are authorized to submit this grant application on behalf of your organization.

Attachments

- 1. Board of Directors List ***
- 2. Project/Local Advisory Board List (if applicable)**
- 3. Most Recent 990 ***



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If your organization is not required to file a 990, please upload a short statement explaining why.

4. Most Recent Audited Financial Statements

If you do not have an audited financial statements, please provide your most recent 990 if your organization is required to file one.

5. IRS Determination Letter or Proof of Fiscal Sponsorship *

6. Detailed Organization Budget *

Upload your organization's annual budget (in any format)

7. Detailed Project Budget *

- If requesting general operating support, you may upload your organization's annual budget (please include sources of revenue).
Full Grant Application*

Optional Attachments

You may attach up to 10 additional files (cover letter, letters of support, news clippings, etc.)