

**Macrogrants | Application**

**Contact Information**

Legal Organization Name \*

Name of Project \*

Contact Person and Title \*

Executive Director \*

Project Coordinator \*

Year Organization was Established \*

Phone \*

Email \*

Website

Address \*

City, State, Zip Code \*

Is your organization a 501(c)3 or do you have a fiscal agent? \* Yes No

If yes, please list the Employee Identification Number (EIN) or the name of your fiscal agent.

What is your organization's current operating budget? \*

What is the total cost of the project? \*

How much money are you requesting from the Innovation Grant? \*

How many people are served by the project? \*

Executive Summary - Summarize your entire proposal \*  
*Maximum Allowed: 2000 characters*

Organizational Overview – Summarize your organization’s history, mission, goals, and population served, and highlight organizational accomplishments.  
*Maximum Allowed: 2000 characters*

Need statement – What problem, need or issue does this project address? \*  
*Maximum Allowed: 2000 characters*

Goals and objectives – What do you hope to accomplish and what are the specific results or outcomes you hope to see? \*   
*Maximum Allowed: 2000 characters*

Project description – Include methodology and timeline and describe the programs, services and/or activities that will achieve the desired results. \*

Evaluation – What is the plan for assessing program accomplishments? \*  
*Maximum Allowed: 2000 characters*.

Sustainability – What are the strategies for developing capacity to continue the program? Please include other current or potential funding sources. \*  
*Maximum Allowed: 2000 characters*.

Budget Narrative – Narrative of program revenues and expenses \*

File Uploads  
PLEASE UPLOAD IN PDF FORMAT.

* Program Budget
* Organization Operating Budget
* List of Board Members
* IRS Form 990/Audited Financial Statement
* IRS Determination Letter