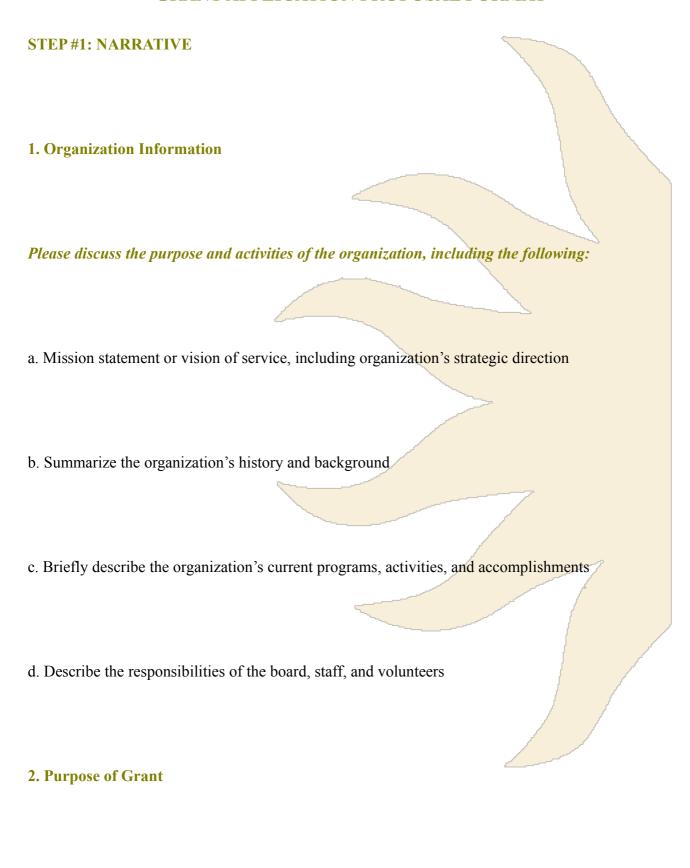
GRANT APPLICATION PROPOSAL FORMAT



a. State the need/issue to be addressed through your proposed program, project or service and hoe it will help you achieve current of future objectives of the organization. Be sure to demonstrate your project's innovation, creativity, dynamic collaborations or exemplary volunteer service.

| - Please describe the initiatives that promotes and preserves the Hellenic culture and heritage |
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| |
| - Describe the program goals and measurable outcomes, including specific numbers of individuals who will benefit as a result of your program. |
| The man contain at a recurrent form programs |
| b. Describe your target population, including available data, and how they will benefit. |
| |
| - Profile any anticipated barriers to reaching your target population, and how your program will overcome these barriers, if applicable. |
| |
| c. Outline the specific work plan to accomplish stated goals and measurable outcomes, including outreach and recruitment of participants, program implementation, evaluation and follow-up |
| |
| - Please discuss how success will be defined and measured |
| - Describe activities or tasks that will occur on a day to day basis, if applicable |
| - Timetable for implementation and timetable that the grant will cover |

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| - Number of individuals, geographic ar from this grant | rea, and target population (including demographics) benefiting |
|---|--|
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| | ations, if any, participation in the project and their roles; list anizations, businesses, foundations, or corporations. |
| | |
| 3. Other | |
| | |
| a. Long term strategies for funding of t project) | this project at the end of the grant period (if applicable to your |
| | |
| STEP #2: ATTACHMENTS | |
| Please attach the following materials in Steps #1 and #2: | n addition to the narrative and cover sheet outlined above in |
| 1. Finances (please see sample budget | format attached, if needed) |
| | |
| a. Total project/program budget amoun | nt |
| - Please detail the specific use of the re | equested funds |

| - Please include a description and total amount for each category | |
|--|----------|
| 2. Other | |
| a. Financial statements from your most recently completed fiscal year, whether audited or unedited | ed |
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| | |
| b. Proof of tax exempt status under Section 501(c) 3 of the IRS code | |
| | |
| | |
| c. Board of Directors (List of board members and affiliations) | |
| | |
| d. Informational or publicity materials and brochures that showcase your organization and its | |
| programs | <i>A</i> |
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