



DEKALB COUNTY COMMUNITY FOUNDATION
PROMISE FUND
GRANT APPLICATION

Please complete this application and submit to the DeKalb County Community Foundation, 2600 DeKalb Ave., Sycamore, IL 60178 by **November 1**, either hard copy or email. Please print neatly or type. If you have questions, please call the Community Foundation at (815) 748-5383. Please refer to the Promise Fund Grant Guidelines as well.

Name of Organization: _____

Contact Person/Title: _____

Address: _____

City/State/Zip: _____

Phone Number: _____ **Fax Number:** _____

Email: _____ **Website:** _____

Please describe your current grant request in the box below:

Project/Purpose of Current Grant Request:

Anticipated Project Dates: From:

To:

Total Project Cost: \$

Amount Requested from the DCCF: \$

Target population served by the project/purpose:

Approximate number of DeKalb County residents served by this project/purpose:

Signature, Contact Person

Date

DCCF Promise Fund Grant Application
Project Description

Please include the following in your description:

- ⇒ General description of the project
- ⇒ Specific purpose of funds requested
- ⇒ Activities planned to meet objectives
- ⇒ Plans for future funding of the project
- ⇒ Target population served
- ⇒ Evidence of need for the project
- ⇒ Time required to complete activities
- ⇒ Expected benefits and outcomes of the project.
- ⇒ If collaborative, details of collaboration

Attach additional pages if necessary.

DCCF Promise Fund Grant Application

Attachments

Organization Case Statement - Includes Mission Statement, brief history of the organization, services provided, the total number of DeKalb County residents served annually, and any additional accomplishments. (***Required***)

If this project is collaborative in nature, please include a letter of support or agreement from each of the key participants in the project (***Required***)

Photos and/or additional support material (***Optional***)

For Office Use Only:

Date submitted: _____ Grant Application # _____

(Promise Fund Committee Member Reviewer(s): _____, _____, _____

_____, _____, _____, _____, _____