



Young Leaders of Licking County Community Grant Application

1. Organization Information

Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Organization Website: _____

Organization Phone #: _____

Tax ID #: _____

Executive Director Name: _____

Grant Contact Name: _____

Grant Contact Title: _____

Grant Contact Email: _____

Grant Contact Phone #: _____

Organization's Mission:



Brief Summary of Organization History:

Maximum Number of Words: 250

Brief Description of Current Programs/Projects and Activities:

Maximum Number of Words: 250

Specific Population and Geographic Service Area:

2. Program/Project Information

Program/Project Name (Descriptions of projects, not the entire organization):

Is this an established Program/Project for your organization?

Yes No

Date Established: _____

Time Frame for Program/Project Activities (mm/yyyy to mm/yyyy):

Budget for Program/Project: _____

Can your organization accept partial funding?

Yes No



Program/Project Description

Provide information to help our reviewers understand what the program/project does and how the grant funding will be used. If this is a new program/project (less than 3 years in existence), explain the program/project development and identify development partners:

Maximum Number of Words: 250

Total Unduplicated # of People to be Served by the Program/Project:

How is the Program/Project success measured? (Example, "every client," "random sample," "type of tool-pre/post," "phone call," "web-based survey," etc.)

THE NEXT GENERATION OF LICKING COUNTY LEADERS.

Young Leaders of Licking County is an affiliate of the Licking County Chamber of Commerce

Collaboration

Include (1) names of the entities with which this program collaborates/partners; and (2) function of role partners (for example: "shared resources," "referrals," "decision-making," "accountability," "funding," etc.).

The Young Leaders of Licking County have four key pillars: leadership development, creative arts and culture, networking and community development and philanthropy. Under which pillar do you think this program best fits and why?

3. Certifications

_____ I certify that this organization's Board supports this application.

_____ I certify that to the best of our ability to determine, the information contained in this application is true and correct.

Signature

Date