



Viola W. Bernard Foundation

366 5th Street
New York, New York 11215

PROPOSAL FACE SHEET

To be completed by grant seeker

Date: _____

Deadline must be postmarked by:
August 31, 2009
January 31, 2010

ORGANIZATION INFORMATION

Name of Organization:		
Legal name, if different:		
Address:		
City, State, Zip:		
Employer Identification Number (EIN):		
Phone:	Fax:	Website:
Contact person regarding this application:		
Title:	Phone:	Email:
Mission of organization:		

Is your organization an IRS 501(c)(3) not-for-profit? ___Yes ___No

PROPOSAL INFORMATION

Please let us know the purpose of the grant (using only the space provided):
Measure(s) of success for the grant:

Is this program unique? If yes, please explain in the space provided:
How will this effort be sustained?
Amount requested: \$
Percentage of philanthropic support for this project:

Please explain how this grant proposal meets the mission of Viola W. Bernard Foundation:

<p>Check list of Enclosures:</p> <p><input type="checkbox"/> 501(c)(3) Letter</p> <p><input type="checkbox"/> Audit</p> <p><input type="checkbox"/> Total annual budget for the organization</p> <p><input type="checkbox"/> Total budget for the project</p> <p><input type="checkbox"/> List of funders who support the organization</p> <p><input type="checkbox"/> List of services of support for the project</p>
