



## Grant Request Application

**Requesting Organization** \_\_\_\_\_ **Date** \_\_\_\_\_

**Name of Requestor** \_\_\_\_\_ **Amount of Funds Requested \$** \_\_\_\_\_

Briefly describe organization; attach bylaws if appropriate.

Is your organization officially recognized by the OVA?

Does your organization have a bank account? Treasurer's name \_\_\_\_\_

Describe the reason for this grant application.

What goals and objectives will this grant help you achieve?

How will you accomplish your objective? Please be specific.

What will this project cost? \$ \_\_\_\_\_ How were costs determined?

How will success be measured?

How will this project benefit Oakmont residents?

*Project leader contact information:*

Name \_\_\_\_\_ Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

*Please return completed grant request application to:*

Oakmont Community Foundation, 6637 Oakmont Drive, Suite A, Santa Rosa, CA 95409