***LYCOMING LAW ASSOCIATION FOUNDATION***

**Community Outreach Grant Request**

**GRANT APPLICATION**

**Please submit this grant application and supporting documents by email only to:**

**Executive Director Michele Frey**

**mfrey@lycolaw.org**

**All applications will be considered upon receipt**

**Inquiries regarding pending grant applications may be made by letter to the above email address**

**Applications will be considered by the Community Outreach Committee and forwarded to the Board of Directors of the Lycoming Law Association Foundation when deemed appropriate**

**Please provide complete, concise responses to each of the following questions:**

**(Please type all answers on printed form for submission)**

**NAME OF ORGANIZATION OR PERSON REQUESTING GRANT:**

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**NAME AND TITLE OF CONTACT PERSON:**

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**PHONE NUMBER/FAX NUMBER:**

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**MAILING ADDRESS:**

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**EMAIL ADDRESS:**

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**ORGANIZATION TYPE (NON-PROFIT OR OTHER, PLEASE SPECIFY):**

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**TAX STATUS (DOES ORGANIZATION HAVE 501(c)(3) STATUS?):**

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**PLEASE EXPLAIN THE MISSION AND FOCUS OF THE ORGANIZATION MAKING THE REQUEST:**

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**PLEASE EXPLAIN THE PERSONS/COMMUNITIES REGULARLY SERVED BY THE ORGANIZATION MAKING THE REQUEST:**

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**PLEASE PROVIDE THE FOLLOWING INFORMATION ABOUT THE SPECIFIC GRANT BEING REQUESTED:**

**NAME OR TITLE OF THE ANTICIPATED PROJECT:**

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**DESCRIPTION OF THE PROPOSED PROJECT:**

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**THE LYCOMING LAW ASSOCIATION FOUNDATION STRONGLY FAVORS GRANT REQUESTS WHICH SUPPORT OR PROMOTE PROJECTS AND ACTIVITIES THAT RELATE TO LAW-RELATED EDUCATION, FACILITATE THE ADMINISTRATION OF JUSTICE OR PROVIDE OR EXPAND THE PROVISION OF LEGAL SERVICES TO LOW INCOME PERSONS.**

**PLEASE PROVIDE A DESCRIPTION OF HOW THE PROPOSED PROJECT WILL RELATE TO THE ABOVE MISSION:**

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**PLEASE PROVIDE A DETAILED DESCRIPTION OF HOW THE PROPOSED PROJECT IS EXPECTED TO IMPACT THE LYCOMING COUNTY COMMUNITY:**

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**SUCCESSFUL GRANT APPLICANTS WILL BE REQUIRED TO PROVIDE A REPORT WITHIN SIX (6) MONTHS OF RECEIPT OF THE REQUESTED FUNDS DETAILING THE SUCCESS AND IMPACT OF THE PROJECT FUNDED. PLEASE SET FORTH A LIST OF PROPOSED CRITERIA WHICH WILL BE USED TO DEMONSTRATE THE SUCCESS OF THE PROJECT FUNDED:**

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**LIST THE START DATE FOR THE PROJECT:**

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**LIST THE ANTICIPATED COMPLETION DATE FOR THE PROJECT:**

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**PLEASE LIST ALL PLANNED ADVERTISING OR OTHER ANTICIPATED PROMOTION WHICH WILL BE UTILIZED TO PROMOTE THE FUNDED PROJECT:**

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**THE LYCOMING LAW ASSOCIATION FOUNDATION FAVORS FUNDING REQUESTS FOR A SPECIFIC AMOUNT TO BE PROVIDED THROUGH A SINGLE DISBURSEMENT OF FUNDS. PLEASE LIST THE AMOUNT REQUESTED:**

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**PLEASE LIST ALL FINANCIAL CONTRIBUTIONS WHICH WILL BE MADE BY THE ORGANIZATION REQUESTING THE GRANT TOWARD COMPLETION OF THE PROJECT DETAILED ABOVE:**

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**PLEASE LIST BY SOURCE AND AMOUNT ANY MATCHING FUNDS THAT WILL BE PROVIDED BASED ON AMOUNTS RECEIVED FROM THE LYCOMING LAW ASSOCIATION FUND:**

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**PLEASE LIST BY SOURCE AND AMOUNT ALL OTHER FUNDING SOURCES BEING UTILIZED OR ANTICIPATED TO BE UTILZED FOR COMPLETION OF THE ABOVE DESCRIBED PROJECT:**

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**PLEASE SET FORTH THE TOTAL PROJECT BUDGET:**

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**IF THE PROPOSED PROJECT WILL REQUIRE ONGOING FINANCIAL SUPPORT BEYOND THAT PROVIDED THROUGH THIS GRANT OR THE OTHER FUNDING SOURCES LISTED ABOVE, PLEASE EXPLAIN EXPECTED SOURCES OF ADDITIONAL FUNDING TO CONTINUE THE FINANCIAL VIABILITY OF THE PROPOSED PROJECT:**

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**IN ADDITION TO THE ABOVE INFORMATION, PLEASE PROVIDE THE FOLLOWING WITH YOUR APPLICATION:**

1. A cover letter which includes a brief overview of the organization’s history, a description of the programs, activities and services currently offered by the organization, an explanation of the current need, problem or opportunity to be met through the provision of grant funds and any relevant timeline regarding the grant request being made;
2. Copy of most recent I.R.S. letter regarding your organization or sponsor’s tax-exempt status;
3. List of Board of Directors, Professional Staff and Advisory Committees;
4. Current year’s budget and itemized project budget.

The undersigned hereby verifies that all information in this application and all attachments are true and correct to the best of my information and belief and that the receipt of any grant funds pursuant to the above request will be used solely for the purposes detailed within the above application.

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Printed Name Job Title

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Signature Date