

# JOHN W. AND ANNA H. HANES GRANT APPLICATION

When completed please email to Lyn at [LW@SalemCounsel.com](mailto:LW@SalemCounsel.com)

<b>Organization Name:</b>	<b>Legal Name for Tax ID:</b>
<b>Tax ID#:</b>	<b>Tax Exemption Date:</b>
<b>Mailing Address:</b>	<b>Website URL:</b>

<b>Application Submitted by:</b>	
<b>Title:</b>	<b>Email:</b>
<b>Phone #:</b>	<b>Submission Date:</b>

<b>Project Title:</b>	
<b>Amount Requested:</b>	<b>Total Project Budget including requested amount:</b>

<b>Provide a concise (one paragraph) summary of the grant project:</b>
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<b>Project Time Line:</b>
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**Grant Project Overview:** (Describe the main objectives, implementation plan and how results will be measured.)

**How will the project benefit the citizens of Forsyth County and/or North Carolina?**

**Other Project Funding Sources and Amounts:**

**Organization Overview:** (Please provide a brief overview of your organization.)

**What Percentage of Your Budget for the most recent fiscal year was Spent On:**

**Salaries and benefits:**

**Rent and office expenses:**

**Other administrative expenses:**

**Programs and projects:**

Please list past grant requests (both granted and rejected) to the John W. and Anna H. in the boxes below. Please include the requests for the past 5 years.

Request Date	Approved or Rejected	Project to be Funded by the Request	Requested Amount	Grant Amount	Grant Amount Received

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PLEASE ATTACH TO YOUR EMAIL SUBMISSION ANY OF THE FOLLOWING INFORMATION THAT YOU FEEL WOULD BE HELPFUL IN OUR EVALUATION:

1. (MANDATORY) 501(c)(3) qualification letter
2. PDF of organizations most recent annual report or overview brochure
3. Other printed material regarding the program to which the grant will be applied