

Grant Application

Small Grant Form Requests for \$1,000.00 or less

Organization Name:		Website:			
Contact Name(s):		Contact Email:			
Address:		Phone:			
City / Zip Code:					
Program / project title		Number of people served by proogram or project			
Today's Date:	Date Amount is Needed:		Amount Requested:		
What percentage of your grant request will fund program / project total?	%		ing to accept a partial grant request?	Yes	No
If applicable / who are the other funding :	sources for this program or proj	ect.			
Describe your proposed program or proje	ect, including its purpose and go	oals. (You ma	y attach the description if	preferred)	
How will this grant benefit the residents	of Villa Park?				
By submitting this application, the undersigne awarded, the undersigned agrees to use the fu					

Applicant Signature	ſ	Date