

NSET Grant Application Form

Please attach with a letter requesting funds.

Date _____

Organization/Family/Individual: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

Email: _____

Contact Person: _____

Title: _____

Have you received a grant through the NSET before? _____ When? _____

Approximate Number of People Served? _____

Amount requested: \$ _____

What funding has been received? _____ From Whom? _____

Brief description of request and how it supports the NSET's granting purposes:

If needed attach a separate sheet of paper.

Are there other funds needed to implement this project/program? _____

Project budget: \$ _____

From Whom? _____

What Amount? _____

What date are the funds needed? _____

What flexibility do you have? _____

Your organizations annual budget: \$ _____

Does your organization have a 501(c)3 status? _____

(Please attach 501(c)3 documentation-not necessary to qualify)

Signature of responsible officer of organization:

Title: _____

NOTE: Application must be received atleast 7 days before funds are requested.

CONTACT AND MINIMUM GRANT REQUEST INFORMATION NEEDED IS LISTED BELOW.

Grant request "Letter of Intent" required information:

- The letter of intent should be restricted to 1 page.
- A brief description of the problem or need you plan to address, with an explanation of how your response supported by this grant will achieve the desired results.
- How is your request aligned with the NSET's Grant Program Purposes?
- Amount of your intended Grant Request.