

## 2024/25 APPLICATION FOR FUNDING

INSTRUCTIONS: Submit requests and include all of the following information, indicating that which is not applicable to your organization. Proposals received after **October 1** will not be considered, unless mailed and postmarked by October 1.

**★**Funds not used in accordance with the grant application must be returned.

NOTE: Any funds allocated by Attic Angel Association are intended to be disbursed by the end of our fiscal year, March 31.

l l	★Evaluations must be submitted as requested or your agency will be ineligible for future grants.		
A. SUMMARY			
Organization Name:			Tax ID #:
Address			
City:		State:	Zip:
Contact Name:			Title:
Phone:	E-Mail:		Fax:
Your Project Name:			
Amount Requested: \$			
B. PROPOSAL NARRATIVE (Including the following information)			
1. General Information List of your Board of Directors Attach IRS Letter of Tax Exemption Have you received funding from AAA before for this program? If so, when and how much? Unique aspects of this program from others in the community Which Dane County communities would/will be served by this grant?	2. Purpose of Grant  Description of program/project  Need determination  Specific goals for this project  Measures of success  Time line of program/project  Number of staff involved  Level of volunteer involvement  Who & how many will be served		3. Financial Information  Project program budget (include timeframe)  Other funding sources  Current organization operating budget and balance sheet  Identify if there is a cost to those served  Provisions made for those who cannot pay
C. CERTIFICATION			
I certify that any grant money received will be used as indicated on this application form.  Signed:  D. SUBMIT			

Proposal and this form must be submitted directly to Attic Angel Association at the address OR by email no later than: October 1

Attic Angel Association ● 640 Junction Road ● Madison, WI 53717 608-662-8900 ● angelofc@atticangel.org