

Tuscola County
community foundation

For **good**. For **ever**.™

List Family Fund Grant Application	
1. Applicant (Organization) Information	
Legal Name:	
Address:	
City, State and Zip:	
2. Employer Identification Number:	
3. Type of Applicant:	
4. Name and contact information of person to be contacted on matters involving this application:	
First Name:	Last Name:
Email:	Phone #:
5. Name of Project:	
6. Geographic Area Served:	
7. Summary Description of Project: <i>(Include purpose, goals/objectives, how project will be implemented, location and frequency project will be offered, how need was determined, identify community and target number to be served. Attach additional page as needed.)</i>	
8. Funding Request	
A. TCCF - List Funding	\$
B. Applicant Funding	\$
C. Other (specify)	\$
D. Other (specify)	\$
E. Other (specify)	\$
G. Total	\$
9. Proposed Project Start Date:	End Date:
10. Applicant Certification & Signatures	
<i>To the best of my knowledge and belief, statements in the attached application are true and correct; the document has been duly authorized by the governing body of the applicant; and the applicant organization will comply with applicable laws, regulations, terms and conditions in effect at the time of the grant.</i>	
Authorized Representative:	
First Name:	Last Name:
Title:	Telephone Number:
Signature:	Date:
Signature Of Secondary Rep (if applicable):	
First Name:	Last Name:
Title:	Telephone Number:
Signature	Date: