Rocket Shop Farm

Applicant Info

First Name: Last Name:

Phone Number: Emai Address:

Address Line:

City: ZIP/Postal:

Organization Information

Full Legal Organization Name:

Address Line:

City: State/Province / Region: ZIP/Postal:

Phone Number: Website:

Executive Director Name: Tittle:

Phone: Emai Address:

Additional Point of Contact Name: Tittle:

Phone: Emai Address:

Year Established: Total Org. Budget:

Fiscal Year

Month: Day:

501(c)(3)?

☐ Yes ☐ No

Total # of Board Members: Total # of Full Time Staff:

Total # of Part Time Staff: Total # of Volunteers:

Organization Mission Statement:

Brief Organization Description:

Brief Overview of Population Served:

Proposal

Proposal Summary:

Statement of Need:

Background:

Goals & Objectives:

Methodology:

Activities

What activates will you do, if you are chosen for the grant?

Timeline

Is there more than one task you will use to complete the activities? Record them here. If you need more space download the PDF Timeline Here. Once completed, upload it at the end of the form.

Tasks: Responsible: Start:

End: Days: Status:

Qualifications / Staff

Please fill out the names, qualifications, and responsibilities of the people who will participate in the project. If you need more space to add names, please download the fillable Qualifications and Staff Form Here, fill it out, and then upload it at the end of this form.

Name and Role: Qualifications: Responsibilities:

Sustainability:

How will you keep the project going after receiving the grant?

Budget & Justification

Please fill out the budget section to the best of your ability. If you need more space to add items to your budget, please download the fillable budget sheet here. Once it's complete, save and upload it at the end of the form.

Budget Overview:

Item Description: Justification: Cost: Quantity:

Conclusion

Conclusion:

Appendix

Email all completed applications to **grants@rocketshopfarm.com**