



"Binky" www.judithwolfe.com ©2004

T H E
B I N K Y
F O U N D A T I O N

P.O. Box 2807, New York, NY 10163

F O R W A R D S T E P S
G R A N T A P P L I C A T I O N

(For requests of \$2,500 or greater)

Applicant: _____ **Date:** _____

Project Name/Description: _____

Amount Requested: _____ **Time Frame:** _____

Please complete the following information to the best of your ability. Submit the completed grant application either by regular mail to The Binky Foundation at P.O. Box 2807, New York, NY 10163, or by e-mail to info@binkyfoundation.org.

If you have any questions about the application process please write The Binky Foundation at the address above or e-mail us at info@binkyfoundation.org.

I. COVER LETTER: Explain the purpose of request along with a brief explanation of goals, objectives, and intended outcomes. (Please no more than one page.)

II. ORGANIZATIONAL & CONTACT INFORMATION: Complete the following as it pertains to you and your project. Please note that not every line item applies to every project. If the information requested is not applicable to you or your project, enter the initials "NA" on corresponding line.

BASIC INFORMATION		
Project Name:		
Address:		
City:	State:	Zip:
Phone:	Alternate Phone:	
E-mail Address:		
Web Address:		
Tax Exempt Status:		
Other:	Government ID:	
Contact Person:		
Title:	Phone:	

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III. MISSION STATEMENT: Using no more than three sentences, summarize your mission and goals.

IV. PROPOSAL NARRATIVE: Include the following information in the order provided (please no more than five single-spaced pages).

A. Organizational Background:

State organization’s history; current projects, activities, major achievements, and future goals. Is there a relationship (formal or informal) with other non-profit or community organizations? If so, how does this impact your programs and goals?

B. Purpose of Funding Request:

Explain intended use of grant. Address the issue of need in the community, how activities address these issues and state the anticipated results. Explain how program model was developed and describe program’s track record (if applicable). What are specific goals and objectives? Is there an ongoing need for funding? What is to be accomplished that may not be met otherwise? Is the project sustainable, and if so, what plans have been made to accomplish this?

C. Capacity:

Describe individual or organizational capacity to implement proposed project/program. Describe any limitations and how these will continue to be addressed. How will this assistance help to increase individual or organizational capacity to meet goals? Who will carry out the plans outlined in this request? Please specify their qualifications. If grant request amount is \$5000, or more, please attach resumes of key participants as part of the attachment section. Describe any governmental or public agency affiliation.

D. Time Frame:

Describe time frame in which funds will be used, please be specific.

E. Evaluation:

How will the measurable results of this assistance be determined? Indicate what process and/or impact information will be collected to demonstrate program’s success or effectiveness. Please include any material you deem relevant along with the required attachments.

V. ORGANIZATIONAL & PROJECT BUDGET SPECIFICATIONS: Complete the following. However, if you have already prepared organizational and project budgets that approximate the format below, you may submit your organizational budget in its original form instead of completing the form below. Please note that not every line item applies to every project. If the information requested is not applicable to your situation enter an “NA” in the corresponding section.

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 B U D G E T F O R M

Applicant: _____ **Date:** _____

Project Name/Description: _____

PROJECT EXPENSES		
Total Requested: \$	Itemized Expenses	Internal Use Only
Salaries and Wages		
Payroll Taxes and Benefit Costs		
Consultants or Professional Fees		
Supplies and Merchandise		
Communications (phone, postage, etc.)		
Office Space		
Equipment and Maintenance		
Travel and Related Expenses		
Printing and Advertising		
Land Acquisition		
Other (please specify)		
Total Expenses		

VI. FISCAL AGENT: Complete the following.

Do you, or have you ever had a fiscal agent? Yes: _____ No: _____

If the answer is "Yes," please explain:

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VII. ATTACHMENTS:

1. Include any appropriate letters of support, recent newspaper and magazine articles
2. The Binky Foundation reserves the right to request or procure any further relevant documentation or proposal narratives during its assessment process

VIII. AGREEMENT: By signing and submitting this application to the Binky Foundation, you agree to the following:

- The Foundation has no obligation to provide any funding to your organization until it advises you in writing that it has approved the grant;
- The Foundation has no obligation to provide any further support beyond the amount approved in writing;
- The funds will be used only for the purposes set forth in the application or as agreed in writing by the Foundation;
- You will provide an interim and/or final report supporting the use of the funds in such form as requested by the Foundation;
- Any reference by your organization to the Foundation, other than in a listing of contributors, is subject to the review and approval of the Foundation; and
- No funds granted to you by the Foundation may be used for political purposes or in any way to promote or influence pending legislation.

IX. SIGNATURE:

Authorization Signature: _____ **Date:** _____

Must be signed by head of project or chief executive officer.

Name (printed): _____ **Title** _____

Phone number: _____ **E-mail:** _____