

Grants -- Request To Apply

Please enter and submit the Request To Apply Grant Form:

Date of Request:

Applicant Department:

Applicant Department Grant Contact Name:

Applicant Department Grant Contact Title:

Committee of Jurisdiction:

Name of Grant:

Funding Source:

Amount of Grant Request: Local Match Requirement: \$

Source of Match: ☐ General Fund ☐ Non-General Fund ☒ Not Applicable

Timeframe of Grant: through

Type of Grant Request: ☐ Monetary ☐ Other (explain under 'purpose of grant')

Please keep entries below to 300 characters or less.

Purpose of Grant (summary):

How Does the Grant Meet City/Department/Program Goals:

What are the Personnel Requirements (include both existing and new staff) of the Grant?: