



County Grant Program

Application for Funding

APPLICATIONS WILL BE ACCEPTED YEAR-ROUND.

**Completed application should be sent to:
Jill M. Bruce, ISMA Alliance
322 Canal Walk • Indianapolis, IN 46202
Fax 317-261-2076 • E-mail jbruce@ismanet.org**

1. Title of project _____
2. Amount requested _____
3. Local Alliance information: _____
Name of Alliance _____
Contact name/title _____
Address _____
City _____ State _____ Zip _____
Phone number _____
E-mail address _____
4. Signature of applicant _____

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5. Project information:

Describe the suggested project and its goals.

What is the suggested time period for conducting the project?

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Who will benefit from the project?

Describe how this project will have a direct and positive benefit on lives.

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6. Project financials

How will the monies be spent? ***Please include a detailed list of items to be purchased, i.e. materials, facility rental, advertising, printing, etc.***

Item	Estimated cost

If the ISMA-A only funds a portion of the total cost, how will the balance of the cost be funded?