

Building Community Together

Community Service Grant Application

Title of Project:					
Youth Contact Person:					
Address (Street #, City/Town, Zip Code)					
Sponsor Organization:					
Adult Advisor:					
Advisor Address:					
How many youth will participate (must be at least 2)?					
Age range of youth in group: How many adults will participate?					

- A. Please describe your project:
- B. What problem or need does it address?
- C. Who will benefit from this project? How many will benefit?
- D. a. How are youth involved or responsible for the work of this project?
 - b. How are adults involved or responsible for the work of the project?
- E. How will youth be given recognition for work on this project?
- F. When will the project begin and end?

- G. Where will the project take place?
- H. How will you know if you accomplish your project?
- I. How much funding are you requesting to complete this project?
- J. Who will keep receipts from the project and be responsible for submitting the required form upon completion of the project to the BCT Board?

Budget	t Narrative	Quantity	Cost	Total Cost
1.	Supplies/Purchase/Rental Example: Latex Paint	12 gallons	@\$18.00/gallon	\$216.00
2.	Transportation Example: Charter Bus	5 trips	@\$20.00/trip	\$100.00
3.	Miscellaneous			
				Total Cost:
Signed:		Date proposal submitted		
	Complete all sections of the application! Keep a copy of the application for your group. Detach the application section from the guideline section and send to: Building Community Together C/O Sandusky County Communities Foundation 1245 Napoleon St. Fremont, OH 43420			