

PLEASE PROVIDE THE FOLLOWING INFORMATION:

1. List below other sources of support for the proposed project or program, including total contributions committed to date.
2. State your organization's mission, goals, and major achievements.
3. Describe the project including the need, the background, specific activities, their expected achievements and their evaluation.
4. Provide a complete project/program budget including facilities, equipment, and staff support.
5. If awarded, how will DSCF funds be used in relation to the total cost and how will additional funds, if any, be obtained?
6. When will the proposed project/program be implemented and completed? How will you measure the success or completion of the project?
7. Who are the key personnel in the program/project and what are their roles?
8. Who will benefit from this program or project? Include the expected number of persons to be served by this project/program.
9. How will your organization publicly recognize DSCF's grant?

PLEASE INCLUDE A COPY OF:

- Your most recent annual report and/or financial statement and audit (or Form 990)
- A copy of your annual budget; a list of your directors and officers
- A copy of your IRS letter of determination of 501(c)(3) status

PLEASE SUBMIT THE ORIGINAL AND THREE COPIES OF YOUR PROPOSAL TO:

Dripping Springs Community Foundation
P. O. Box 1684
Dripping Springs, TX 78620

Chairman or President of the Board:

Signature: _____
Date: _____