



## Grant Application

<b>Date Submitted:</b>		
<b>Requesting Group Info:</b>		
Neighborhood Location Served:		
Group Leader/Contac Name:		
Address:		
City:	State:	Zip:
Daytime phone:	Cell phone:	
E-mail address:		
Do you prefer to be contacted via e-mail? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Tax Exempt? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, Tax ID:	
Group's Purpose or Mission Statement		
Has this organization previously requested a donation/grant from the Monroeville Foundation? <input type="checkbox"/> Yes <input type="checkbox"/> No		If Yes, Date:
<b>Donation Request Details</b>		
Name of Project:		
Amount Requested:		
Project's Budget:		
Other Funding Sources:		
How would the Monroeville Foundation's donation be used in this project? Please give a budget breakdown.		

Project Description and how will this project benefit the residents, community groups, government, business and/or other institutions of Monroeville?

Deadline for Donation:

**Submission Instructions:**

Send completed application to:

By Mail: The Monroeville Foundation  
2700 Monroeville Blvd.  
Monroeville, PA 15146

Or

By Email: [info@monroevillefoundation.org](mailto:info@monroevillefoundation.org)

All fields on the application must be completed to be considered for a grant.

Call (412) 856-3304 if you have any questions.