

**NOMINEE**Organization Name:  

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Applicant Name/Title:  

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Address:  

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City, State Zip:  

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Phone:  

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Email:  

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Website:  

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Executive Name/Title (if different than applicant):  

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Board Chair/President (if different than applicant):  

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**NARRATIVE****DIRECTIONS:** Please type your answers in 11-point font and do not exceed a total of four pages.

**Question 1: Describe the project or activity your organization has provided within the last year.** Include a description of the targeted population (e.g. middle-school aged children, elderly residents, etc.) and how many participated, the project's timetable (e.g. a three-week program two hours twice a week), where the project took place, personnel involved, the activity itself (e.g. wellness classes, free dental exams for the homeless, etc.):

**Response 1:**

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**Question 2: Why did your organization choose this project?** Did the population request it? Has it proven a successful endeavor in the past, here in Howard County or elsewhere?

**Response 2:**

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**Question 3: How does or did this project make a difference in someone's life?** You may write about an individual's story, or talk about the general population affected. Describe how the impact was measured and include specific details (e.g. these two children tutored by a retired teacher living at Vantage House improved their reading grades from a C to an A.).

**Response 3:**

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**ATTACHMENTS**

- A PDF your organization's 501(c)(3) designation.

**SIGNATURE**

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I certify that the information contained in this grant application and its attachments are complete and accurate to the best of my knowledge. Completion of the form below indicates certification.

*The application must be signed by the Chief Executive Officer or Board Chair.*

NAME and TITLE	
SIGNATURE and DATE	

**Thank you for your nomination!**