Topfer Family Foundation Grant Application Form

Note to Chicago area applicants: TFF is not accepting unsolicited applications from the Chicago area at this time

Organization Information

Organization Name	
Street Address	
City State 7in	
City, State, Zip Main Phone	Main Fax
Organization's Website URL	Wiam Fax
Executive Director / President	Phone
/ CEO Name	Thore
Title	E-mail
Application Information	
Project Title: (a short one-sentence description of the project – 50 characterists) New Project OR On-going Project	- <u></u>
Amount Requesting from TFF:	\$
Total Project Budget:	\$
Annual Budget for Organization:	\$
Number of People Served by the Proj Cost Per Participant	εcτ \$
Cost Per Participant	
Time Frame In Which Funds Will Be	e Used
Start Date:	End Date:
Have you previously received funding from TFF? Referred to TFF by:	If yes, when? Month/Year
Program Area – TFF funds projects within	the following categories. Please check the category that corresponds with your project
☐ Aging in Place ☐ Job Training and Support Services fo ☐ Youth Enrichment Programs for the ☐ Child Abuse Prevention and Treatme ☐ Children's Health Issues ☐ Other:	e Economically Disadvantaged ent
Geographic Service Area(s) – you ma ☐ DuPage County, IL ☐ Cook County, IL ☐ Lake County, IL ☐ Other IL County:	y select up to three ☐ Travis County, TX ☐ Williamson County, TX ☐ Burnet County, TX ☐ Hayes County, TX

☐ Other State:	☐ Other TX County:
Organization Description (Offer insight into your organize 600 words maximum	gation, its background, mission and overall effectiveness.)
Project Description (Clearly describe your project, its method will reach and how you will reach them.) 800 words maximum	hodology and timeline. Define its objectives, the audience you
Description of the community your organization is the community you are trying to impact and give us evidence of ne 400 words maximum	

rogress and success.) 00 words maximum			ne your plan for measuring
IO words maximum			
T	1	- C 11: 1 1	1.1
Iow do you plan to sustain	adequate project funding	g tor this project beyon	a the time trame of thi
rant request?			
00 words maximum			
		in the least comments	- 1 ··
Description of similar proje rganization/project differs			
rganizanon/ proiect differs	s ana / or any emores made	to cougnotate and out i	
	and, or any enous made	to conaborate and, or p	partner.
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	, and, or any onome made		parmer.
	, and, or any onone made		parmer.
			Darmer.
			parmer.
	# of Paid FTE	# of Paid PTE	# of Volunteers
00 words maximum			
00 words maximum			
Staff Composition			
Staff Composition	# of Paid FTE	# of Paid PTE	# of Volunteers
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00 words maximum	# of Paid FTE	# of Paid PTE	# of Volunteers

Application Contact – Staff person to conta	ect regarding this application	
Primary Contact Name	Phone	
Title	E-mail	
Note: The form below is available as an Ex	ccel document from within the o	
Organization Name:	<u> </u>	
Project Title:		
Organizatio	on Budget Information	
Organization's Fiscal Year (start/end date):		
Organization's Overall Operating Budget fo	or Previous Fiscal Year:	
Organization's Overall Operating Budget fo	or Current Fiscal Year:	
Organization's Overall Operating Budget fo	or Year in which Funding is Req	uested:
Organization's Overall Program Budget (tot	al for all programs run by organizat	ion) :
Organization's Overall Fundraising & Adm	inistration Budget:	
Percentage of Annual Budget used for Fund	lraising & Administration:	
1. BUDGETED Funding Sources for Org	ganization for Current Fiscal	(ear
		YTD Amount
Source	Amount Budgeted	Committed
Governmental		
Foundations		
Corporations		
United Way		
Individuals		
Fundraising Events		
In-Kind		
Other		
Other		
Total Commit	ted	

Project Budget Information

This section refers to the project for which funding is requested.

Expense Description	Amount
Total Project Cost	\$0

3. Committed Funding Sources for Project by Type of Funder (not required if applying for General Operating Support)

		# of	Average Grant
Source	Amount Committed	Grants	Amount
Governmental			#DIV/0!
Foundations			#DIV/0!
Corporations			#DIV/0!
United Way			#DIV/0!
Individuals			
Fundraising Events			
In-Kind			
Other			
Other			
Total Committed	\$0		

4. Committed Funding Sources for this Project by Name of Funder (not required if applying for General Operating Support) Total Committed in #3 & #4 should match.

Funder Name or Source	
(ex. John Doe Foundation or Individual Donations)	Amount Committed

	Total Committed	\$0
5. Potential Funding Sources for this Project by List organizations from which you are seeking or intention		
Source	Amount	Status of Request/Expected Response date
		_

\$0

Total Committed