

**ORGANIZATION INFORMATION**

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| **ORGANIZATION NAME** | **ORGANIZATION PRESIDENT** |
| **STREET ADDRESS** | **WEBSITE** |
| **CITY** | **STATE** | **ZIP CODE** | **TELEPHONE NO.** | **FAX NO.** | **E-MAIL ADDRESS** |
| **CONTACT** | **TITLE** |
| **Is your organization funded by the United Way? Yes No** |
| **EMPLOYER IDENTIFICATION NUMBER (EIN) or Federal Tax ID Number:** **A nine-digit number assigned by the Internal Revenue Service** |
| **Have you previously applied for a grant from the First Savings Charitable Foundation? Yes No****If your organization has received funding from the First Savings Charitable Foundation, please list the project name, the date received and the amount awarded:** |
| **PROJECT NAME:**  | **DATE RECEIVED:** | **AMOUNT AWARDED:****$**  |
| **Briefly describe the mission, goals and objections of your organization.**  |

**GRANT APPLICATION**

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| --- |
| PROJECT NAME |
| DATE OF PROJECT | TOTAL PROJECT COST $ | AMOUNT REQUESTED $  |
| HOW MANY PEOPLE WILL THIS PROJECT BENEFIT?  | IN WHAT COUNTY IS YOUR PROJECT LOCATED? |
| **Briefly** describe the project.  |
| List any First Savings Bank employees involved in this project and describe their role. |

**PROJECT INFORMATION**