

**Grant Application**

**The Jordon Lenamon Foundation was created to support organizations by giving grants to nonprofits that provide support, education, and public awareness for those that suffer from mental illness and help with the prevention of suicide.**

Date Click or tap to enter a date.

Contact information: Click or tap here to enter text.

Organization name Click or tap here to enter text.

Executive Director Click or tap here to enter text.

Address Click or tap here to enter text.

Phone Click or tap here to enter text.

Email Click or tap here to enter text.

Social media Click or tap here to enter text.

Website Click or tap here to enter text.

EIN Click or tap here to enter text.

Executive Summary (*general information of organization, year founded, etc*.)

Click or tap here to enter text.

Mission Statement (m*ission must support mental health and suicide prevention*)

Click or tap here to enter text.

Goals and Objectives of your organization

Click or tap here to enter text.

Purpose of Grant: (*what will the funds be used for, dates of project, etc.*?)

Click or tap here to enter text.

What unique things separate you from other applicants?

Click or tap here to enter text.

Other Funding or Sustainability

Click or tap here to enter text.

Budget

Click or tap here to enter text.

Amount of funding requested (*this is a one-time payment per grant awarded*)

Click or tap here to enter text.

*Note: Recognition must be given to The Jordon Lenamon Foundation on awarded organizations website and/or social media.*

Signature: Date:

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Executive Director

Administrative use only:

|  |  |
| --- | --- |
| Date Received |  |
| Reviewed by: |  |
| Signed |  |
| Approved [ ]   | Denied [ ]   |