



The  
Madison  
Foundation, Inc.

The Madison Foundation, Inc.  
P.O. Box 446  
Madison, CT 06443

[www.themadisonfoundation.org](http://www.themadisonfoundation.org)

## Grant Application

Date: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Person in charge of project: \_\_\_\_\_ Phone/email: \_\_\_\_\_

Project: \_\_\_\_\_

Purpose/Objectives of the Grant: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Summary of the Project: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Description of the benefits to be achieved and the population to be served: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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Amount requested and rationale: \_\_\_\_\_

Estimated cost of the project, if different from request: \_\_\_\_\_

Other funding sources contacted: \_\_\_\_\_

Brief summary of current organizational budget, including all funding sources: \_\_\_\_\_

Date for first funding: \_\_\_\_\_

Do you wish to receive funding in installments? Yes / No

Schedule of Implementation:

Attach, if available and applicable (please check if attached):

- organizational mission statement
- supporting statements
- names of directors
- financial report
- project descriptions
- other documentation ( \_\_\_\_\_ )

Thank you.

Please mail this application with any attachments to:

**The Madison Foundation, Inc.**

**P.O. Box 446**

**Madison, CT 06443**