



**OFFICE OF THE COUNTY COMMISSION,  
JEFFERSON COUNTY, ALABAMA**

Today's Date: \_\_\_\_\_ Project Name: \_\_\_\_\_

Project Beginning Date: \_\_\_\_\_ Project End Date: \_\_\_\_\_

Amount Requested: \_\_\_\_\_ Date Funds Needed: \_\_\_\_\_

Name of Applicant Organization: \_\_\_\_\_

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

City & Zip Code: \_\_\_\_\_ Tax ID #: \_\_\_\_\_

Contact Name(s): \_\_\_\_\_ Telephone No. \_\_\_\_\_

Fax No.: \_\_\_\_\_ Email Address: \_\_\_\_\_

List of Board Members: \_\_\_\_\_

Are any Board Members related: Yes/No      If Yes, identify relationship.

On a separate sheet(s), please briefly answer the following questions:

1. Describe the applicant organization, including its purpose, leadership structure and activity.
2. Describe the proposed project or activity and provide a timeline for completion.
3. Explain the anticipated positive impact of the proposed project or activity and identify the specific communities that will benefit.
4. Are there any matching funds or in-kind contributions related to this project? (Yes/No)  
If yes, please provide information detailing the additional sources and amounts involved.

\*Applicant may be contacted during the review process and asked to provide a complete line item budget.