Ladies Benevolent Society

Oshkosh Area Community Foundation - Grants

PROPOSAL OVERVIEW

Program Name* Name of project, proposal or program. *Character Limit: 100*

Grant Start Date*

The Foundation will only consider funding requests for programs or services that have not yet occurred.

Character Limit: 10

Grant End Date* Character Limit: 10

Grant Amount Requested* Character Limit: 20

Total Project/Program Budget* Character Limit: 20

Annual Organization Operating Expenses* Character Limit: 20

Executive Summary* Describe your grant request in 2-3 sentences. *Character Limit: 1000*

PROPOSAL DETAILS

Proposal Description* Describe your grant request in more detail. *Character Limit: 5000*

Target Population*

Who specifically would benefit from the proposed activities? How many Oshkosh area residents would be directly affected?

Character Limit: 5000

Printed On: 31 July 2023

Project Budget*

Briefly explain sources of revenue and details of expenses for the proposed activities. Be specific about how Community Foundation grant dollars would be spent.

Character Limit: 5000

Past Grant*

Did your organization receive a grant from the Ladies Benevolent Society - Advocates for Older Adults Fund last year?

Choices

Yes No

REPORT ON PAST GRANT

Accountability*

Describe how the Community Foundation's grant money was spent. Did you spend all of the grant money? If not, how much is left over?

Character Limit: 3000

Impact*

How many people were impacted by the grant funded activities? Provide an example, story or quote to illustrate how older adults' lives were improved as a result of this grant.

Character Limit: 3000 | File Size Limit: 25 MB

ADDITIONAL INFORMATION

Additional Information

You may share or upload any additional information relevant to this request that you think would be helpful in the grant review process. Please note that videos cannot be uploaded, but you can include a link to an online video in the text area.

Character Limit: 2500 | File Size Limit: 25 MB