

North Oaks Community Foundation Innovation Grant Application Form

Date:_____

Organization Information

Name_____

Address_____ Phone_____

Email and/or website_____

Employer Identification Number (EIN)_____ MN Tax ID_____

Name of contact person_____ Phone_____

Email address_____

Proposal Information

1. In summary form, please describe the project, its purpose and the the impact it will have on the community.
2. In summary form, please provide the total budgeted cost of the project with an itemized list of all costs and any ongoing or maintenance costs that may be expected.
3. Additional information may be submitted to the Foundation.

