Greater Bergen REALTORS®
REALTORS® Care Foundation
411 Route 17 South, 5th Floor
Hasbrouck Heights, NJ 07604

2020 Grant Application

Legal Name of Organization	**Employer Tax ID# (EIN)**
Physical Location	**Mailing Address**
Phone Number	**Organization Website**
Chief Executive Officer	**Contact Info for Grant Writer (name/ phone number)**
Previously Applied for Grant: (YES / NO) If Yes, which years:	**Referred By (Optional)**
Approximate Number of Persons Served Annually	
Number of Volunteers	**Number of Employees**
Geographic Area Served	
Mission and Service of Organization (Attach additional pages if necessary; If attached, must identify page number)	**Project for which Funds are Requested. Must be specific; general operating funds request is not applicable.**
Amount Requested $	**Timeframe in which Funds will be Spent: From To**

Applications should be mailed to:
REALTORS Care Foundation
411 Route 17 South, 5th Floor
Hasbrouck Heights, NJ 07604

Application Due: 5PM Friday, October 30, 2020

DOCUMENT CHECKLIST TO INCLUDE WITH GRANT APPLICATION:

- ☐ **2019 Audited Financial Statements**
- ☐ **IRS 501c(3) IRS Confirmation Letter**
- ☐ **List of Directors or Trustees**
- ☐ **2019 Annual Report**
- ☐ **Project Evaluation Criteria**
- ☐ **Itemized Project Budget for Funds**
- ☐ **Current Funding Sources**

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CEO/Authorized Representative Signature Date

Note: This Grant Application Page is mandatory and must be completed & submitted with all grant requests.