



## 2010 GRANT APPLICATION

Grant Number \_\_\_\_\_ - \_\_\_\_\_ (office use only)

Date: \_\_\_\_\_ Amount Requested: \$ \_\_\_\_\_

Contact Name(s): \_\_\_\_\_

Department/Unit: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Name of Program/Equipment requesting funding for: \_\_\_\_\_

Provide a brief description and the need for the program/equipment (use additional paper if needed):

Has this program/equipment previously been requested through the city budget?  YES  NO

If yes, please list the most recent date of submission and the result. \_\_\_\_\_

If no, please explain the reason why it was not submitted. \_\_\_\_\_

What objectives will be accomplished if the funding is granted?

How can the foundation evaluate success if the funding is granted? (# of people served, objectives reached, surveys, etc.)

Please list or attach an itemized list for expenses or a quote from equipment manufacturer on vendor's letterhead.

Has your commanding officer approved this request?  YES  NO

Name of commanding officer: \_\_\_\_\_

Signature of commanding officer: \_\_\_\_\_

Send completed grant application form by fax (213) 489-4697 or email [bryan@lapolicefoundation.org](mailto:bryan@lapolicefoundation.org) or call Beth Ryan at (213) 489-4636 with any questions, comments or concerns.