THE MYLANDER FOUNDATION GRANT APPLICATION COVER PAGE

Please type:		
Organization		
Project Title		
Amount Requested		Employer Identification Number
Address		City, State, Zip
Telephone	_ Telefax	E-mail
Executive Director		Telephone
Signature of Executive Director or Person Approving Application		Date
Grant Contact Person		Telephone

Required Information

1) Please provide a project narrative (not to exceed 2 pages) answering the following, in this order:

- (a) Summarize the purpose of your project and explain how this grant will be used?
 - (b) Who will this project benefit and in what ways?
 - (c) How will The Mylander Foundation grant funds be used?
 - (d) How will the total cost of this project be funded?
 - (i) if the grant is denied?
 - (ii) if other sources of funding are needed for the project? Are these funds pending or have they been obtained, and from what sources? If you are seeking The Mylander Foundation grant as matching funds for another grant, please explain the terms of the matching grant.
 - (e) If the project is totally funded by grant(s) and the project is to be ongoing how will the project be supported and funded in the future years?
- (2) Completed Budget Form (provided on page 2 of this application)

Required Attachments

- (1) 501(c)(3) IRS determination letter. If you are a church, governmental or other entity covered by a group exemption, provide a copy of the group exemption letter and documentation of your inclusion within the group.
- (2) Current Form 990 or if you do not file Form 990, your most recent financial statement, and annual budget
- (3) Mission statement
- (4) List of board members

Grants are awarded twice annually.

Timeline and Submission

Application deadlines are April 16 and October 1

Submit **1 original** of the completed application with cover sheet, narrative and budget form, **and 1 copy** of the required attachments to: The Mylander Foundation

Eric M. Muehlhauser

165 E. Washington Row, Sandusky, Ohio 44870 Phone: 419-625-8324 Email: emuehlhauser@mylanderfoundation.org

Limit on Information: Please submit **only** requested information. Any additional information submitted as part of the grant application will not be considered. Please do not bind the pages of your application other than with a staple nor place your Application in a folder or jacket.

Extensive and voluminous supporting material will not be reviewed or considered by the Distribution Committee. **PLEASE BE BRIEF.**

Incomplete applications, faxed applications, or applications submitted after the deadline will not be considered.

Applicant organizations may be contacted for further information or documentation regarding the grant application. However, it is the policy of The Mylander Foundation Distribution Committee not to engage in discussion regarding outcomes of pending grant proposals.

THE MYLANDER FOUNDATION BUDGET FORM

Directions: Please type the information on the Budget Form and attach to Project Narrative.

Total Project Cost	Please list the entire cost of the project. The combined amounts of Column C and Column D will equal the total listed in Column B.	
The Mylander Foundation Grant Request	Please list the funds requested from The Mylander Foundation only in Column C.	
Other Funding for Project	Please list in Column D any additional funds from other sources needed to complete this project.	

The Mylander Foundation Grant Funding is limited to the following:

Services	Any contracted services (for example, printing, professional advice, presenters, or independent contractor fees or special employees services) to be funded with this grant.
Supplies Capital Improvements	Any supplies for the project to be paid for with funds from this grant. Any property purchase, equipment, building materials or facility improvements of the project to be funded with this grant.
Other	Any costs that do not fit into the above categories. Please explain these costs in the program narrative.

Please note: The Mylander Foundation does not ordinarily make grants to fund salaries for organization employees.

Date project is to begin: _____

Completion Date: _____

A.	B.	С.	D.
Category	Total Project	The Mylander Foundation Grant Request	Other Funding for Project
	Cost	List amount and items to be purchased	List amount and items to be purchased
Services			
Supplies			
Capital			
Improvements			
Other			
Oulor			
Total Project			
Cost			
[B = C + D]			