

CROSSROADS FUND – EMERGENCY FUND APPLICATION

Date: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Main Contact Person: _____ Title: _____

Phone: _____ Fax: _____

Website: _____ Email: _____

- Amount Requested: \$ _____ Purpose: _____
- Tax Status: 501(c)(3) Other: _____
- Name, address, phone and contact of fiscal agent, if applicable: _____
- Current Fiscal Year ORGANIZATION budget: \$ _____ PROJECT budget: \$ _____

If you receive this grant, will it be your organization's first foundation grant? Yes No

Have you applied to Crossroads before? Yes No If yes, when?

Have you received funding from Crossroads? Yes No

If yes, list dates and amounts of previous grants: _____

If yes, have you filed the progress report for your most recent grant? ** Yes No **

***If no, please enclose a copy of the progress report with this request.*

Your proposal will not be considered for funding without a progress report for your most recent grant.

Emergency Fund Proposal Narrative

Please address each question below within 2 pages with a 12 point or larger font. If you have received a Crossroads grant in the last 12 months, only complete questions #2 and #3.

1. Overview

- * Briefly describe your organization's history, purpose, and the type of work it does.
- * Please explain how you meet Crossroads' Funding Criteria.

2. Emergency Need

- * What is the nature of the emergency? Why is this situation an emergency?
- * What activities will be carried out?
- * What result do you want to see? What impact do you want to make with the work?

3. Budget

- * What is the budget for this emergency work?
- * How much are you requesting from the Crossroads Fund?
- * What is the organizational budget?