



The Lang Family Foundation, Inc.

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sm

Community Grant Request

www.thelangfamilyfoundation.com



Focus Area

- Cultural
- Educational
- Social Services
- Other: _____

Date of Application: _____

Organizational Information

Organization Name:			
Address:			
City, State, Zip:			
E-Mail:			
Phone:		Fax:	
Web Address:			
Federal ID/EIN #			
Executive Director		Phone:	
Contact Name/ Title:		Phone:	

Request Information

- New Project
- On-going Project

Amount Requested: _____

Project Title: _____

When Are Funds Required: _____

Have you previously received funds from the Lang Family Foundation? _____ If yes, when? _____

Organizational Description *(short description of your organization, mission, background, and effectiveness.)*

Project Description *(Two paragraphs – 1. Please describe the project for which you are requesting funding. 2. Define the objectives, purpose, background, who is involved, who is the target audience, goals, desired outcome, how you will reach the goals and how you will measure success.)*

Project Budget Information – *This section refers to the project for which funding is requested.*

Itemized Project Budget

Expense Description	Amount
	\$
	\$
	\$
	\$
	\$
	\$

Total Project Budget: _____

Committed Funding Sources for Project

Source	Amount Committed	Number of Grants	Average Grant Amount
Governmental	\$		
Corporate	\$		
Foundation	\$		
Individuals	\$		
In-Kind	\$		
United Way	\$		
Other:	\$		
Other:	\$		
Total Committed	\$		