Name of agency applying for assistance

Name of partner agencies involved in grant writing requests (If Applicable)

Is your agency a not-for-profit 501c3 organization?

Please describe the services that your organization provides Orleans County and the needs within the community that its mission statement fulfils.

Grant applying for, if known. Please specify the due date and any other details of interest. Grant writing requests with deadlines under one month may not be accepted.

If there is not a grant already specified, are you seeking assistance finding a grant that fits your organization’s needs? Please elaborate on what those specific needs are.

\*\*\*Before submitting this form please make sure you have read and understand the grant writing assistance priorities and have submitted all the necessary materials to assist the grant writer.