

**Fayette County Bar Foundation, Inc.**  
**GRANT APPLICATION FORM**

Name of Organization: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Contact: \_\_\_\_\_

Project Title: \_\_\_\_\_

Name of Sponsoring Attorney: \_\_\_\_\_

Description of Project (Explain how project meets Fayette County Bar Foundation funding priorities and describe the outcomes project will achieve. Use additional page if necessary.):

Total Cost of Proposed Project: \$ \_\_\_\_\_ Amount Requested: \$ \_\_\_\_\_

Funds Secured – Amount & Source (Do not list potential funding Sources): \_\_\_\_\_

Estimate Number of Persons Project is Designed to Directly Benefit: \_\_\_\_\_

Date: \_\_\_\_\_  
Signature of Applicant and Title

Return to Fayette County Bar Foundation ten (10) copies of completed Grant Application Form and attachments, including:

- Project Budget                       Board of Directors Roster                       Sponsoring attorney letter