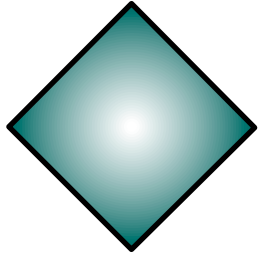


Piedmont Down Syndrome Support Network



Piedmont Down Syndrome Support Network
Non-Profit Organization
Tax ID # 20-3131948
4045 University Parkway
Winston-Salem, NC 27106

Community Support Grant Application Form

1 - PLEASE ENTER YOUR CHARITY'S/ORGANIZATION'S DETAILS

Charity/Organization Details

Name of Charity/Organization	Tax ID #:	Address:
Is the charity/organization part of a larger organization? If so, which?		
County where funds will be used.		
Aims of charity/organization:		
Name of the activity/project for which you want a grant, and what the grant will be used for:		
What are the specific benefits of the activity/project?		
How will you monitor and evaluate it?		

2 - ACTIVITY/PROJECT FINANCIAL DETAILS

Financial Details

What is the total amount you would like from the Piedmont Down Syndrome Support Network

Breakdown of costs
for the activity/project

Cost of Activity/Project

How PDSSN funds will be used

What results have you had from other applications (if applicable) for funding?

Source	Amount Requested	Result: Yes/No/Pending

3 - CONTACT & REFERENCE DETAILS

Contact Details

Contact name Mr./Mrs./Miss/Other

Position in organization

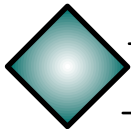
Address of charity/organization

Telephone Number

E-mail Address

4 - GRANT APPLICATION CONDITIONS

I hereby state that the information listed above is accurate. I agree that details shown may be kept and used as a reference by the PDSSN Board Members.



Signed

Name (please print)

Date

5 - RETURN BY MAIL

Please return this form and any other information you want us to review in consideration of your application.

Piedmont Down Syndrome Support Network
Grant Application
4045 University Parkway
Winston-Salem, NC 27106