



Application Date: _____

Your Federal Tax ID #: _____

**LETTER OF INTENT
COMMUNITY IMPACT GRANT
(Unrestricted Grants Over \$5,000)
Strategic Focus: Education**

Name of Applicant/Organization: _____

Address: _____

Contact Person and Title: _____

Phone Number: _____ **FAX Number:** _____

Email Address: _____

Project Name: _____

Dates of the Project: _____ **Amount Requested: \$** _____ **Total Project Cost: \$** _____

Qualified projects and programs must support one or more of the following. Please indicate the area(s) that your initiative supports. You must be able to justify your selection within your proposal.

College Readiness

- High school programs supporting student achievement and success
- Implementation of proven programs
- Tutoring to improve aptitude in reading, math, or science
- Enrichment or extracurricular initiatives related to academic success
- School credit recovery, i.e. summer school or online programs

Post Secondary Access

- Financial planning related to post secondary attainment
- Navigating the college application process
- Career/College planning and research
- GED Attainment
- Childcare support

Family and Student Support Related to High School and Post Secondary Achievement

- Mentoring- parental or student support to foster education attainment
- Mental/social health
- Teen mentoring and pregnancy prevention
- Truancy issues

Does your organization have 501©3 nonprofit status? Yes No

Have you read and understood JCF’s “Unrestricted Grantmaking Policies?” Yes No

Summarize the following: Please answer the following questions to describe the issue you wish to address, limiting the description to **two pages or less**:

- Describe the issue and/or need you will address.
- How will you address the issue/need?
- What will be accomplished through this project?
- How do you plan to evaluate your success?
- What is the proposed time frame for the project?

Attachments: Please attach a **project budget** including other funding sources. Specify the amount of your **overall annual operating budget**.

Authorization:

Signature, Executive Director

Date

Typed Name and Title

Executive Director Email Address: _____

Executive Director Phone Number: _____

Please forward three copies of this form and your Letter of Intent to:

Jackson Community Foundation
Dana Emerson, Grant and Scholarship Coordinator
One Jackson Square, Suite 308
Jackson, MI 49201
(517) 787-1321 (517) 787-4333 fax

The Jackson Community Foundation will respond to this Letter of Intent within 21 days. In order to allow your organization ample time to complete a full grant application, if requested, Letters of Intent should be **submitted by August 1, 2011.**

Grant Deadline	Award Notification
September 15 by 5:00 PM	Mid-November