



**2023 Safety Grant Program
Project Application Cover Page & Budget Summary Worksheet**

Project & Applicant Information

Lead Organization: _____

Organization Type (check one; for Other, state type):

- | | |
|---------------------------------------|---|
| <input type="checkbox"/> Municipality | <input type="checkbox"/> Non-Profit (501(c)3) |
| <input type="checkbox"/> School | <input type="checkbox"/> Other _____ |

Project Title: _____

Project Description (Brief 2- or 3-sentence summary of project)

Amount of funding request: _____ Maximum: _____ Minimum: _____

(Maximum funds available for all grants combined is \$20,000.)

Project Leader:

Name: _____

Phone: _____ Email: _____

Partner Organizations (the lead organization must partner with at least one other organization)

Area of community project will be implemented:



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Budget Summary Worksheet

Spending Detail	Grant Funds Requested	Other Funds from other Sources	In-Kind contributions	Total Amount

Notes
