

# Residents of Old Wilmington

P.O. Box 1862  
Wilmington, NC 28402

## Grant Application

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

Mailing Address

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Tax Identification Number: \_\_\_\_\_

Yes

No

Are you a not-for-profit organization?

Are you a Government agency?

Has the organization/public agency received  
a grant from ROW in the past 3 years?

Contact individual responsible for this project/program: \_\_\_\_\_

Phone: \_\_\_\_\_ Email address: \_\_\_\_\_

Provide a brief overview of your project/program (1-3 sentence summary):

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Total amount requested from ROW: \_\_\_\_\_

Please provide a detailed description of your project/program including the following information. Please add any additional information that you think might be helpful.

- State the project/program goals.
- Who will benefit from this specific project/program?
- What is the project/program’s timeframe, start date, and projected completion date?
- Where will activities take place?
- What are the expected outcomes of the specific project/program?
- How will the grant monies be used?
- How would ROW be recognized for awarding a grant to your organization?

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**Additional attachments:** Project/program budget including all income sources. List of board of directors, if applicable.

**Certification**

Acting as a duly authorized representative of the organization, I am submitting this application for a ROW grant.

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Type your name to sign or sign in ink)

**For Committee Use Only:**

Date full application received _____	
Date reviewed by Committee _____	Committee recommendation _____
Date presented to Board _____	Board decision _____
Date presented to Membership _____	Membership decision _____
Amount approved _____	Date of written notification to applicant _____