

# PA VISION FOUNDATION GRANT APPLICATION

Legal Name of Organization: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Year Founded: \_\_\_\_\_ Current Annual Operating Budget: \$ \_\_\_\_\_

Executive Director: \_\_\_\_\_ Email: \_\_\_\_\_

Contact Person/Title (if different from Executive Director): \_\_\_\_\_

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Website: \_\_\_\_\_

Project Name: \_\_\_\_\_

Purpose: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Amount Requested: \$ \_\_\_\_\_ Frequency:  Once  Monthly  Yearly

Total Project Cost: \$ \_\_\_\_\_

Source(s) of Additional Funding: \_\_\_\_\_

\_\_\_\_\_

Project Goals: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Beginning and Ending Dates of the Project/Campaign: \_\_\_\_\_

Geographic Area to be Served: \_\_\_\_\_

Name/Address/Phone Number of 3 References: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## I CERTIFY, TO THE BEST OF MY KNOWLEDGE, THAT:

1. The tax-exempt status of this Organization is still in effect.
2. This Organization does not directly or indirectly engage in or support any terrorist activity.
3. Neither the Organization, nor any officer or director of thereof, is included on any lists of terrorists or terrorist organizations compiled by the United States government or any other national or international body, including but not limited to (i) the U.S. Treasury Department's Specially Designated Nationals List, (ii) the U.S. State Department's Terrorist Exclusion List, (iii) the United Nations List Pursuant to Security Council Resolution 1390 (2002) and Paragraphs 4(B) of Resolution 1267 (1999) and 8(C) of Resolution 1333 (2000), and (iv) the European Union List Implementing Article 2(3) of Regulation (EC) No 2580/2001 on Specific Restrictive measures Directed Against Certain Persons and Entities with a View to Combating Terrorism. This Organization does not distribute funds to benefit, directly or indirectly, any individual or organization that is engaged in or supportive of terrorism.

## Signatures:

\_\_\_\_\_  
President, Board of Directors / Date

\_\_\_\_\_  
Executive Director / Date

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