



## Community Investment Program Application

Thank you for applying for funding from the Food Forever Fund! Applications will be accepted until 5:00 PM, February 2, 2024. Thank you! Questions may be directed to [grants@goldenharvest.org](mailto:grants@goldenharvest.org).

**Agency or Program Name**

**Agency or Program Number**

**Contact Name**

**Contact Title**

**Contact Phone**

**Contact Email**

**Amount Requested**

### Funding Request

The following questions will help us understand your agency and how a grant would increase your ability to serve your community.

**What stage of development does your grant request focus on?**

- Launch - invest in new and innovative solutions
- Strengthen – improve and expand successful programs
- Stabilize - repair and maintain aging facilities

**Please describe in detail the project for which you are requesting funding. How will this project impact your ability to serve your community?**

**Please briefly describe the programs that your agency or program offers.**

**Please briefly describe your clients. Approximately how many households are you serving monthly?**

**What geographic area do you serve?**

**How will your project help improve the health and nutrition of your clients? (or not applicable)**

**How will your project improve your agency or program's storage or logistics capacity? (or not applicable)**

**How will your project improve the overall impact of your agency? (Number of meals/clients served)**

**Please give a detailed budget for your project. Please include specific line items with the type of equipment or facilities, along with the associated cost. (Reminder - the following types of expenses cannot be covered by the grant: staff costs, food purchase, consumable supplies like boxes, bags, tape, & paper products.)**

**Will you be able to leverage this grant to get additional matching funds?**

**How would partial grant funding affect your plan?**

**Is there any additional information you'd like our committee to know?**