



**Project G.I.F.T. of Teen Leadership Troy
(Grants Investing in the Future of Troy)**

Organization Name _____

Address _____

Contact Person/Project Leaders _____

Title _____ Telephone _____

Email _____

Is your organization recognized as a tax-exempt organization under Section 501 (c)(3) of the Internal Revenue Code?

Yes _____ Federal ID# _____ Please attach a copy of your organizations IRS Determination Letter to the application. If no, please explain on separate sheet.

Date organization established _____

Project Title _____

Amount Requested _____ Total project budget _____

Other sources contacted for support for this project and the amount, if applicable:

Date

Signature of Chief Executive Officer/Authorized Official

Submit completed application and accompanying materials to:

Project G.I.F.T. of Teen Leadership Troy
c/o The Troy Foundation
216 W. Franklin Street
Troy, OH 45373
(937) 339-8935
irasor@thetroyfoundation.org