

Seventh Generation Fund Grant Application Cover Sheet

Date of Application:	Grant Request Amount: \$
Organization Information	
Organization Name:	
Contact Name & Title:	
Mailing Address:	
Street	City
State/Province Zip	Country
Phone: () Fax: ()	Email:
Date of Founding:	
Organizational Mission:	
Type of grant support - please check one:	
☐ General Support ☐ Project-Specific	
Project Information	
Project Title (if applying for project-specifi	ic support):
Indigenous Nations/Communities Served: _	
	ur project located?

Please describe your project in one paragraph:	
BUDGET INFORMATION	
Total Organizational Budget: \$	Total Project Budget: \$
Do you have 501(c)3 tax certification as a non-pro ☐ Current SGF Affiliate Project ☐ YES (Attach a copy of the tax certification to your ☐ NO If not, who is your project sponsor? (In agreement)	proposal) EIN #:
Fiscal Sponsor Organization:	
Sponsoring Organization's Employer Identification #	
Contact Name & Title:	
Mailing Address:	
Phone: () Fax: ()	Website: