



THE RAPIDES FOUNDATION



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| Organization Name                                                                                                                                                                                                                      |                                                                                                                                                                                                    |                                                                                                                             |
| Organization Address                                                                                                                                                                                                                   |                                                                                                                                                                                                    |                                                                                                                             |
| Contact Name & Position                                                                                                                                                                                                                |                                                                                                                                                                                                    |                                                                                                                             |
| Contact Email & Phone Number                                                                                                                                                                                                           |                                                                                                                                                                                                    |                                                                                                                             |
| Type of Organization                                                                                                                                                                                                                   | <input type="checkbox"/> Education<br><input type="checkbox"/> Healthcare<br><input type="checkbox"/> Community Member<br><input type="checkbox"/> Business<br><input type="checkbox"/> Government | <input type="checkbox"/> Youth<br><input type="checkbox"/> Faith<br><input type="checkbox"/> Other (please describe): _____ |
| <b>Purpose &amp; Goals</b><br>Describe the role of your organization in the proposed grant activities. Please explain the resources/skills/knowledge/activities that your organization is committing to work on during the grant term. |                                                                                                                                                                                                    |                                                                                                                             |
| <b>Duration</b><br>Our organization is committing to the activities described above for the duration marked (please check all years that apply).                                                                                       | <input type="checkbox"/> Year 1<br><input type="checkbox"/> Year 2<br><input type="checkbox"/> Year 3                                                                                              |                                                                                                                             |
| Printed Name                                                                                                                                                                                                                           |                                                                                                                                                                                                    |                                                                                                                             |
| Signature & Date                                                                                                                                                                                                                       |                                                                                                                                                                                                    |                                                                                                                             |