

# GRANT AUTHORIZATION SIGNATURE FORM



Authorization signatures are required in order to submit a grant application to Kosciusko County Community Foundation. Applicants should complete the top section using responses from their application before collecting the required signatures.

<b>Applicant Name:</b>			
<b>Organization Name:</b>			
<b>Project Description:</b> <i>As stated in the Grant Proposal Section of the application.</i>			
<b>Amount requested:</b>		<b>Total cost of the project/program:</b>	

Please note that the signatures required depend on your organization type:

	<b>501(c)3 Organization</b>	<b>Government Entity</b>	<b>Public/Private School</b>	<b>Church</b>
<b>1<sup>st</sup> signature</b>	Applicant	Applicant	Applicant	Applicant
<b>2<sup>nd</sup> signature</b>	Board Officer	Council Officer	Building Principal or Superintendent	Church Board Officer or Lead Pastor

By providing your signature below, you are indicating that you have reviewed the details of the grant request as stated above and agree to the submission of this request to the Kosciusko County Community Foundation.

Applicant Signature: \_\_\_\_\_  
Date

Applicant (Print): \_\_\_\_\_

Officer/2<sup>nd</sup> Signature: \_\_\_\_\_  
Date

Officer/2<sup>nd</sup> (Print): \_\_\_\_\_