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CUSTOMER'S DAYTIME CONTACT NUMBER: _____



Baltimore County Savings Bank

Administrative Offices

Mailing Address: P.O. Box 397, Perry Hall, MD 21128

Office Location: 4111 E. Joppa Road, Baltimore, MD 21236

p. 410-256-5000 e. info@bcsb.net

www.baltcosavings.com

GRANT APPLICATION

BALTIMORE COUNTY SAVINGS BANK FOUNDATION, INC.

Organization Name: _____

Date of Application: _____

Address: _____

Phone Number: _____ Fax Number: _____

Director: _____

Contact Person and Title (if not Director): _____

Grant Requested: \$ _____ Period Grant will cover: _____

Project Title: _____

Type of Request: _____

Total Project Budget (if request is for other than general support): _____

Total Organizational Budget (current year): \$ _____

Starting Date of Fiscal Year: _____

Summarize the organization's mission (2-3 sentences):

Summary of project or grant request, if applicable (2-3 sentences):



Applicant's Certification

No officer, director, stockholder or employee of, or anyone having a financial interest in, the above-referenced applicant is an officer, director or employee of BCSB Bancorp, Inc., or its Affiliates (Baltimore County Savings Bank, F.S.B.). Nor is any such officer, director, stockholder or employee, or anyone having a financial interest in the Applicant, an officer, director or employee of any affiliate of such entities, or a member of the immediate family of any such officer, director or employee.

Applicant

Baltimore County Savings Bank Foundation, Inc.

Application Format

A. Cover Letter

Includes proposal summary and amount requested. Tailored to address the interests and specific priorities of the funding source. Signed by Executive Director and Board President or other authorized representative to indicate approval of project/funding request.

B. Narrative

1. Agency Information

- a. Brief summary of agency history
- b. Brief statement of agency's mission, goals and/or objectives
- c. Description of current programs, activities and accomplishments
- d. Overall agency plans for the coming year
- e. Description of organizational structure, board/staff responsibilities and level of volunteer involvement
- f. Agency affiliation with federated funds or public agencies

2. Purpose of Grant (this section could include the following)

- a. Statement of need/problem to be addressed; description of constituency served (include number served) target population; how will they benefit?
- b. Description of project goals and measurable activities
- c. Description of program/activities planned to accomplish these goals; is this a new or ongoing activity on the part of sponsoring organization?
- d. Timetable for implementation
- e. Other organizations, if any, participating in the project
- f. List of names and qualifications of key staff/volunteers responsible for project implementation
- g. Long term sources/strategies for funding of this project at end of grant period
- h. Projected project budget (use attached form)

3. Evaluation (please discuss)

- a. Expected results during the funding period
- b. How will you define success and how it will be measured?
- c. How will project's results be used and/or disseminated?

C. Attachments (please attach the following)

1. Board of Directors

- a. Occupations and/or community affiliations; Board Committee assignments
- b. Criteria for board selection

2. Finances

- a. Agency's current annual operating budget
- b. Funding sources for the organization
- c. Past major contributors with amounts
- d. Anticipated future funding sources (if different from above)
- e. Most recent annual financial statement (audited if available)
- f. List of other foundations to which this proposal has been submitted

3. Annual Report (if available)

4. A copy of the original IRS determination letter indicating 501(c)(3) and 509(a) tax exempt status (if applicable)



Grant Format
Baltimore County Savings Bank Foundation, Inc.

Project Budget
(for which you are soliciting funds)
Time Period from _____ to _____

Summary of Expenses

Summary of Revenues

Salaries _____
Fringe Benefits _____
Consultants _____
Travel _____
Equipment _____
Supplies _____
Telephone _____
Evaluation _____
Other _____
Overhead _____
TOTAL _____

Grants _____
City _____
State _____
Federal _____
Foundations _____
Corporate _____
Private _____
Earned Income _____
TOTAL _____