

INDIANAPOLIS Letter of Intent for JLI Trust Fund Grants

ALL BLANKS MUST BE COMPLETED. NO ATTACHMENTS ARE TO BE INCLUDED.

	nt Information				
Organizatio	n Name:				Date:
Address:	Street Address				
	County	City		State	ZIP Code
Phone:	()	FAX ()	_ Website Addres	ss:	
EIN (IRS Tax ID number):			Year Established:		
Operate in Calendar Year or Fiscal Year:			Year From:/ to/		
Number of Paid Staff:			Number of Full-time staff:		
Number of	Volunteers:		Number of Part-time staff:		
Number of Board Members:			Number of Board Meetings:		
Percentage of Board Contributing Annually:			Percentage of Board Meeting Attendance:		
Current Exe	ecutive Director Term in Years:		_		
Contact	Information				
Name:					
	First	Last			
Phone: _	() Email Addres				
FAX:	()		Position:		
	1 – Organization Summary	y			
	tal Monetary Request:			\$	
Line B – Total Organizational Budget for Project Year:				\$	
Line C – Total Project/Initiative Budget:				\$	
Line D – Request as percentage of Organizational Budget: (Divide Line A by Line B)			%		
Line E – Request as percentage of Project/Initiative Budget: (Divide Line A by Line C)				0/0	
Line F – Ag	ge of program (indicate if new or year	s in existence):			
Line G – Number of TOTAL unduplicated children served by this proposal:				#	
Line H – Number of unduplicated children to be served directly by JLI funding:				#	
Line I – Number unduplicated children served by this proposal living in Marion County:				#	
Line J – Program's TOTAL cost per participant (Divide Line C by Line G) Line K – Program's JLI Funded cost per participant (Divide Line A by Line H)				\$	
		ant (Divide Line A by Line H)		\$	
County(c) S	erved by Project				

Section 2 – Project Description					
Briefly describe the project concept. Each page should be single-spaced and use 12 pt. font. Do not					
amend the table width.					
Section 3 – JLI Historical Information					
To assist the JLI in determining whether any potential conflict of interest exists, please indicate whether you					
currently have, or have had in the past three years, any JLI members employed by your organization, volunteering for your organization, or serving on your Board of Directors. (NOTE: Answering "yes" will not					
disqualify your organization from receiving assistance, but will allow the JLI to ensure that proper screening					
measures are implemented in reviewing your application, to ensure fairness for all applicants.)					
☐ No ☐ Yes If yes, please list those individuals, including names and positions.					
2. Has your organization ever received funding or volunteers from the JLI? If yes, please indicate dates, amounts,					
and/or services received.					
Section 4 – Signature – This section must be completed by the applicant's Executive Director.					
Signatura					
Signature: Date: Date:					
Title:					

LETTER OF INTENT SHOULD BE COMPLETED AND SUBMITTED: By 5:00pm on Friday, February 7th, 2020 by email to grants@jlindy.org and include "2020 TFG Letter of Intent" in the subject line Letter of Intent must be saved and attached as a PDF