

# H.A.N.D.S. Foundation

*Helping Achieve New Directions through Students*

“The HANDS Foundation will provide community members with available **resources**  
That will enable them to make a significant and positive effect on the **education**  
And **quality of life** in Whitley County.”

## GRANT APPLICATION

Name: \_\_\_\_\_ School/Organization \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Number Impacted: \_\_\_\_\_

Amount Requested: \_\_\_\_\_ Date Needed By: \_\_\_\_\_

What Will The Money Be Used For? \_\_\_\_\_

\_\_\_\_\_

What Are The Long-Term Goals Expected From This Project? \_\_\_\_\_

\_\_\_\_\_

How Else Will Money Be Raised For This Project? \_\_\_\_\_

\_\_\_\_\_

\*Can you be called during the day to answer questions about your request? Yes/No

\*If YES, where can you be called? Phone Number \_\_\_\_\_

\*Grant requests of **\$500.00** or larger may require attendance at HANDS meeting to answer questions that arise during discussion of the request.

\*Typically, the HANDS Foundation does not fund what can be called operating expenses such as transportation and/or salary.

Attach Required Proposal Describing: Please Mail Grant  
Application To.

1. The need for and importance of this project.
2. The objective and a plan for addressing that need.
3. A budget for the amount requested with justification.

H.A.N.D.S. Foundation  
P.O. Box 527  
Columbia City, IN 46725-0527  
Or Fax To: 260-244-5724

*If you have questions or need more information, call the H.A.N.D.S. Foundation at 260-244-5224 or your local senior H.A.N.D.S. member: **Nicole Pippenger** (260) 693-2360 (Churubusco), **Kyle Reynolds** (260) 244-4758 (Columbia City), or **Ross St. Clair** (260) 723-4194 (Whitko).*