



# Ellis Family Charitable Foundation

Serving the residents of Burlington County, New Jersey

Grant Applications must be received no later than September 30th. The Board of Directors typically meets on the 2nd Monday of November to make decisions on disbursements. Applicants will be notified by email.

It is preferred that all forms and documents be submitted electronically via our website (<http://ellisfamilyfoundation.org>). We provide this paper form primarily as a method of organizing your information prior to submitting online.

The following documents *must be provided* along with all applications:

- ▶ **A brochure explaining your organization; its purpose and history.**
- ▶ **A copy of your 501(c)(3) determination letter.**

if you choose to submit paper documents, they must arrive no later than September 30th. Send paper documents to the Ellis Family Charitable Foundation, c/o Grant Coordinator, PO Box 185, Riverton, NJ 08077.

**Organization Name:** \_\_\_\_\_ legal name

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

**City:** \_\_\_\_\_

**State and Zip Code:** \_\_\_\_\_

**County:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Website:** \_\_\_\_\_

**Fiscal Year Start Date:** \_\_\_\_\_ mm/dd/yyyy

**Tax Exempt under IRS 501(c)(3)?**  YES  NO

**Organization's EIN:** \_\_\_\_\_

**Is the organization part of a municipality?**  YES  NO

**If yes above, name of municipality:** \_\_\_\_\_

**Board Chairperson:** \_\_\_\_\_  Signatory?

**President:** \_\_\_\_\_

**Vice President:** \_\_\_\_\_

**Secretary:** \_\_\_\_\_

**Treasurer:** \_\_\_\_\_

**Executive Contact:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_



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**Describe your Organization:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**How many Burlington County (NJ) residents does your organization serve?** \_\_\_\_\_

**Project Name:** \_\_\_\_\_

**Select a Category:** \_\_\_\_\_

**Dollar Amount Requested:** \_\_\_\_\_

**Total Project Budget:** \_\_\_\_\_

**Describe the Project:** \_\_\_\_\_

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**Primary Project Contact:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_