



# VSF Grant Proposal Cover Sheet

(NOTE: This Proposal Cover Sheet should be considered as a synopsis of your proposal. This cover sheet highlights many of the points that are of particular significance to those deciding the worthiness of your proposal and are important to the final decision.)

Name of Requesting Organization: \_\_\_\_\_

Total Cost of Project \$ \_\_\_\_\_

Total Amount Requested: \$ \_\_\_\_\_

Matching Funds? YES  NO

If YES - Who from? \_\_\_\_\_ Amount \$ \_\_\_\_\_

Who from? \_\_\_\_\_ Amount \$ \_\_\_\_\_

Maximum 5 Word Description of Project: \_\_\_\_\_  
(Ex. scholarships, homelessness, VA hospital visits, assistance, equipment, etc.)

Person Responsible for Administering Grant: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Executive in charge of the Organization: \_\_\_\_\_

Are you VVA National, (a) State Council or Chapter? YES  NO

If NO - Attach a letter of endorsement from either the VVA National Office, a VVA State Council or a VVA Chapter. Attached

Attach your IRS Determination Letter. Attached

**\*\* NOTE – Unnecessary if you are a VVA State Council or Chapter.**

Attach a copy of your most recent IRS form 990 or your most recent financial statement if you are NOT required to submit a 990. Attached

Return address for ALL correspondence:

FOR VSF USE ONLY

VSF GRANT NUMBER \_\_\_\_\_

SPECIAL GRANT CONDITIONS \_\_\_\_\_

\_\_\_\_\_