

## APPLICATION DETAILS

Complete the application form during the designated month. Application will not be accepted after midnight of closing date.

|   |  |
|---|--|
| Date of application                               |  |
| Grant's name                                      |  |
| Area of focus                                     |  |
| Applicant's full name                             |  |
| Job title / Occupation                            |  |
| Applicant's Address                               |  |
| Phone, Email, Website                             |  |
| Applicant's Facebook ID                           |  |
| Organization's name                               |  |
| Bank account name                                 |  |
| A short summary of your application in 400 words. |  |

We may contact you if we need more information or to discuss next steps. If your application is chosen as an eligible application, your submission may be published on the lhfc website and on other social media.