

**Truman Q. McNulty Grant Application**

**Directions:**

* Please review the Guidelines & Instructions before completing your application.
* Download the application and save it to your computer.
* Fill out the form on your computer and save your work. *(You must save it to your computer to email it to us. If you do not follow this step; your work will be lost.)*
* Answer every question on the application.
* Type NA if the question is Not Applicable to your program/project.
* Email us the completed document.
* Save a copy for your records.

**Application Deadline:**

* Your application must be in the WLF office by 5:00 p.m. on the first Friday in April.

**Submit Your Application:**

* **Email application and support materials:** 
  + Pleaseemail your application to us at [WLF-Fellows@wisbar.org](mailto:WLF-Fellows@wisbar.org).
* **If you prefer, you can mail your application and support materials to:**
  + Wisconsin Law Foundation  
    Attn: Beth Drake  
    P.O. Box 7158  
    Madison, WI 53707-7158
* **If you have questions regarding the application or the grant process,** please contact: [WLF-Fellows@wisbar.org](mailto:WLF-Fellows@wisbar.org) or Beth Drake 608-250-6171.

1.  Date Application Submitted:

2. Project/Program Title:

3. Grant Amount Requested:

4. Individual to Contact Regarding this Application and Their Title:

5. Contact Person’s Email Address:

6. Contact Person’s Phone Number:

7. Organization:

8. Website Address:

9. Mailing Address:

10. Federal Taxpayer Identification Number: (Attach copy of your W9)

11. Tax-exempt Status Number: (Attach proof of tax exempt status if applicable)

12. Purpose/Mission of the Organization:

13. Have you received a grant from WLF for the same, or a substantially similar, project/program? If yes, describe:

14. Describe any data, written material, audio visual or other material that will result from this project/program:

**Project/Program Description and Details:**

1.   Give an in-depth description of the grant request project/program.

2. Tell us the project/program’s specific goals and objectives.

3. Explain the benefits to the community.

4. Describe the project/program’s anticipated outcomes:

5. Provide the project/program’s timeline:

6. Indicate which element(s) of WLF’s mission this project/program will address:

Promotes public understanding of the law;

Improves the administration of justice;

Provides law-related public service.

7. The Wisconsin Law Foundation requires that any organization receiving a grant must give credit to the Foundation by including this statement on materials: ***“Funded by a grant from the Wisconsin Law Foundation, charitable arm of the State Bar of Wisconsin.”*** Do you agree to this requirement and how might you do that?

8. How many participants, beneficiaries, or users do you anticipate this project/program serving during the grant year

9. What audience(s) does this project/program target:

Grade school children

High school children

College students

Adults

Elderly

Lawyers

Judiciary

General community

Is a particular socioeconomic group targeted by the project/program?

Please describe:      

10. Geographical impact:

1. Does this project/program have statewide impact?

Please explain:

1. If the project/program does not have statewide impact, specify by name the counties that will benefit:

## **Project/program Funding**

1.  If the Foundation awards this grant, how will the organization continue the project/program beyond this funding cycle? Who will provide funding?

2. What percentage of the total budget is this project/program?

## **Project/Program Budget**

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1.  In your supporting documents please provide:

## a. An itemized budget for this project/program;

## b. Expected project expenses and revenue;

## c. Describe other funding sources and/or efforts to obtain funding for the project.

## d. Details about how Foundation funds will be used.

**Signature of Authorized Person**

Your signature acknowledges:

* I am authorized to sign this grant agreement on behalf of the applicant organization.
* My signature acknowledges that the applicant organization agrees to all conditions laid out in the Foundation’s Truman Q. McNulty Grant Guidelines & Instructions.
* The applicant organization agrees to carry out the project for which the funds are requested, if granted, and to use the funds for no other purpose and to return any funds not utilized in accordance with the grant.

Name:        
  
Title:

Date: