

**2016 Neighborhood Support Program (NSP) Funding Application**

(All applications must be accompanied by a proposal completed according to the Funding Criteria and Requirements. "Project" can mean a project, program or activity. Please print.)

Date of Application: \_\_\_\_\_

**Applicant Information**

Name: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

Email Address \_\_\_\_\_

**Participant Information** - List the names, addresses and phone numbers of all Northside residents involved in the proposed project:

Name	Address	Phone Number

**Project Information**

Name: \_\_\_\_\_

Purpose (25 words or less): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Beginning Date of Project: \_\_\_\_\_ End Date of Project: \_\_\_\_\_

List up to three goals of the project:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Financial Information**

Amount Being Requested: \_\_\_\_\_ Total Cost of Project: \_\_\_\_\_

Date Funding Needed: \_\_\_\_\_

Is NCC your only source of funds? Y N. If no, list all other funding sources and amounts requested:

Name of Funding Source	Amount Requested

**Signatures** (The applicant and two other Northside residents who do not live in the same household or are not members of the same organization or group must sign below)

- 1) \_\_\_\_\_ Date \_\_\_\_\_
- 2) \_\_\_\_\_ Date \_\_\_\_\_
- 3) \_\_\_\_\_ Date \_\_\_\_\_