

Foundation Invited - 2024

Lumpkin Family Foundation

Application Essentials

Project Information

Project Name*

Character Limit: 150

Project Contacts*

(Please list the name, title, email, and phone number of three (3) individuals, including the Executive Director, who have knowledge of this project.)

Character Limit: 1000

Total Amount Requested*

Character Limit: 20

Total Number of Years of Support Requested*

Character Limit: 15

Total Amount Requested Each Year*

Character Limit: 150

Percentage of Organizational Budget*

For each year of support requested, what percentage of your organizational budget does this amount represent?

Character Limit: 150

Estimated Grant Period Start Date*

Character Limit: 10

Estimated Grant Period End Date*

Character Limit: 10

Mission*

We value your work and our partnership. What is the story you want to tell us about where you are as an organization and where you want to be? What story do you hope to share a year from now about the growth and achievements of your organization?

Character Limit: 2500

Additional Documents May Be Requested

