

GREATER HIGH POINT FOOD ALLIANCE

FOOD SECURITY FUND

GRANT APPLICATION SUMMARY

2019 grant cycle is open February 1 – March 22. Grant applications in PDF and Word formats are available online at <https://www.ghpfa.org/>.

Please return all application materials to the Greater High Point Food Alliance (GHPFA) Food Security Fund Grants Committee at the United Way of Greater High Point, 815 Phillips Avenue, High Point, NC 27262. Applications must be received by 3:00 p.m. on Friday, March 22nd. Applications will not be accepted if emailed. One printed, signed copy of the complete application is necessary for consideration.

Questions on the fund and the application cycle should be directed to:

Carl Vierling, Executive Director, GHPFA
phone: 336-899-0885 and carl.vierling@unitedwayhp.org

Brittany McClure, Staff GHPFA, phone: 336-899-0876 and
brittaney.mcclure@unitedwayhp.org

BASIC DATA:

Current Date:
Organization Information:
Organization Name
Mailing Address
City, State, Zip
Office Phone:
Mobile Phone:
Web address
Program Contact Information
Contact Name
Title
Mailing address (if different from above)
City, State, Zip
Office Phone:
Mobile Phone:
Email address

Project Information
Project Title
Brief description, purpose of grant

FINANCIAL INFORMATION

Total amount requested:
Does the group have a bank account?
Who manages the funds for the organization?
What is the total annual budget for your group?
Has the group received funding from other sources in the past? YES or NO If so, please list Source, date received and amount received:

Proposed Project Budget

Project Expense item	Amount requested	Additional funding source	Total
TOTAL	\$	\$	\$

Make note of other funding sources for your project and how a Food Security Fund grant could augment your current programs, activities.

Share your information source for items, where did you price them?

REQUIRED SIGNATURES

We certify that the attached proposal has been discussed and approved by the decision-making body of the applying group and that all information contained in this application is accurate. Should we receive funding from the GHPFA—FSF, we agree to comply with all reporting and monitoring requirements of the granting organization which may include site visits, public relations including social media posts about the impact of the grant, etc.

Group Representative(s):

Signature	Date
Printed Name	Title
Address	Phone
	Email
Signature	Date
Printed Name	Title
Address	Phone
	Email