

Sprint Foundation Grant Application

Organization Information

The Sprint Foundation accepts grant requests all year. Requests submitted after the 3rd Thursday in November will be reviewed in January of the following year. The Sprint Foundation focuses on youth initiatives primarily for ages 5 through 18). Grants for national partnerships are limited to those addressing K-12 Education, School Safety and Internet Safety. Regional and Local grants focus on those areas as well as youth development, and arts & culture. Recipient organizations must be tax exempt and tax deductible, have auditable financial results and comply with all necessary laws regarding registration and reporting. Ineligible requests include those for political or religious organizations, individuals, international organizations and private charities or foundations. More detailed guidelines are provided in the Sprint Foundation section of the Sprint.com website http://www.sprint.com/citizenship/sprint_foundation/index.html). Generally grants are provided for specific program support not for operating expenses.

Note: Applicants who have started an application (actually entered data into the application data fields below) and decide to save the partially completed application, must click on the "Save and Finish Later" button at the bottom of the application page. This will take the applicant to a sign-on/register page. Enter the applicant's email address and create a password in order to save the partially completed application. Please store the password where it can easily be found in the future. Use the following link to return to the saved application. (http://www.grantrequest.com/SID_284?SA=AM).

Today's Date

Organization Name

Organization Address

Organization City

Organization State

Organization Zip Code

Organization Phone

Organization Fax

CEO/President/Executive Director E-mail Address

Organization WWW Address

Please describe your organization.

Last Year's Revenue

Last Year's Assets

Last Year's Overhead Expenses

Last Year's Expenses

Last Year's Liabilities

Prior Year's Revenue

Prior Year's Assets

Prior Year's Overhead Expenses

Prior Year's Expenses

Prior Year's Liabilities

Contact Information

Prefix

Contact First Name

Contact Last Name

Contact Title

Contact Phone Number

Contact Office Fax

Contact E-mail

Donation Information

Request Type

Contributions-Cash Grants

Project Start Date

Project End Date

Project Title

Request Amount

Project Description

Type of Support

Organization's Primary Program Area

Select the focus area that is primarily served by the non profit organization (Primarily = at least 51%).

Number of Participants

Population Served

Select the Population primarily served by your program (Primarily = at least 51%).

If Other, please describe

Ethnicity

Will this program primarily serve a specific ethnicity?

If yes, please select the ethnicity that will primarily be served.

Financial Statement

If your financial statements are audited, please provide the Auditor's Name and the date of the last audit.

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Metro