

Low-Income Senior Support Services Grant Application

Organization Information

Organization Name

Contact Name

Email

Phone

Address

Project Overview

Project Title

Project Summary

Target Population & Needs

Project Details

Goals & Objectives

Key Activities

Expected Outcomes

Timeline

Budget

Total Amount Requested

Budget Breakdown

Other Funding Sources

Organization Qualifications

Mission Statement

Relevant Experience

Additional Information

Supporting Documents

Choose File

No file selected

Comments