

**PROGRAM GRANT APPLICATION**

**Please print and mail the completed form to:**

Peter Glenville Foundation  
8421 Dorchester Road, Suite 109-122  
North Charleston, SC 29420

**Please include following materials in your mailing:**

1. a cover letter going into greater depth about the project for which you are requesting a grant;
2. a copy of your IRS Determination Letter;
3. any additional materials pertinent to your request.

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Organization Name

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Name of Organization Executive Director

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Organization Address

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Organization Phone

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Organization Tax ID

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Dollar Amount Requested from Peter Glenville Foundation

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Total Cost of the Program for Which This Grant Is Part or Whole

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Description of Request

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Organization Mission Statement (brief summary, including year founded)

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Brief Description of Population and Geographical Area Served

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Why does the community need this program?

Grant Cycle (for office use only):