

# CCRES GRANT APPLICATION - COVER PAGE

**For Internal Purposes Only:**

Period of Performance: **July 1, 2019 - June 30, 2020**

Application Type:  New  Continuation

Grant Amount Requested: \$

Have received support from CCRES in past

Grant or Program Name:

Grant Number:

*Please be sure to assign the grant request a program name.*

Amount Granted \$:

Legal Name of Organization:

Organization Information:

Organization Address:

Telephone Number:

Fax Number:

Web Address:

Name of Contact Person:

Contact Phone #:

Address:

Contact Email:

Contact Fax #:

Authorized Person Name

Authorized Phone #:

& Title to Sign on Behalf of

Authorized Email:

Organization:

Type of Organization:

Educational Entity

PA Dept. of Education Administrative Unit Number (AUN)

Non-Profit Entity Under

Section 501( C ) ( 3 )\*

**OR**

Governmental Entity

*\*Please attach copy of IRS designation letter*

Federal Employer Identification Number (FEIN)

Organizational Mission:

Type of Grant Requested:

Capital

Challenge

General Operating Support

Project/Program

Seed

Technology

**This grant must be matched 50%**

Organizational Statistics:

Total Annual or

Number of Employees FT:

Organizational Budget:

Number of Employees PT:

Dates of Fiscal Year:

Number of Volunteers:

Does your organization have child abuse policy and procedures compliant with PA Act 151?  Yes  No

If this grant should be approved:

Any changes to information on this form should be

Check made payable to:

submitted to Executive Director, Michael J. Kelly, J.D., Ed.D:

Address to be mailed to:

michaelkelly@ccres.org

Attention addressed to:

Assistant to Exec. Dir. sharonking@ccres.org

Phone: (484) 593-5040

Signature of Person Authorized to Sign on Behalf of Organization:

If awarded this grant, our organization ("Grantee") hereby agrees to indemnify and hold harmless CCRES, Inc. against any and all liability, claims, suites, losses, costs and legal fees caused by, arising out of, or resulting from any negligent act or omission of the Grantee in the performance and/or failure to perform within the Grantee including the negligent acts or omission of any direct or indirect employees of the Grantee or Subcontractors.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date