**Mensa Of Wisconsin Foundation**

**Grant Letter of Inquiry and Application Form**

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount requested \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nature of Request: \_\_\_\_scholarship capital project operating program

Organization Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization address and website \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact name, title, e-mail address and telephone number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please check the primary service category of organization:

□ Arts/Culture □ Health □ Human Services □ Education □ Environment □ Other (specify)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# **Grant Proposal Narrative**

Describe the mission of your organization, the purpose and objective of your request and any other funding considerations. Please attach an Annual Report.

Describe your request with its compatibility with the MOWF Statement of Purpose, mission and objectives:

Describe how the grant request would support individuals in their educational, training or research pursuits and how the grant would benefit gifted recipients or literacy. How does the grant request assist the recipient and support the mission of your organization?

Please contact Bob Burgermeister, Mensa of Wisconsin Foundation Board member, at

[bob.burgermeister@gmail.com](mailto:bob.burgermeister@gmail.com) with any questions.

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Signature Print name and title Date