

Idaho
Governor's Task Force on
Children at Risk

Contact Information

**Full Legal
Organization
Name**

Street Address

City

State

Zip Code

**Organization
Website**

**Organization
President /
Executive
Director**

Title

Phone Number

E-Mail Address

**Contact Person
(if different)**

Title

Phone Number

E-Mail Address

**Total
Organization
Budget**

Organization Information

Total # of Staff	Total # of Volunteers
Demographics of population served	
Organizational Mission Statements (350 characters or less)	
Brief Description of Organization (500 characters or less)	

Proposal Request

Program / Project Name	Total Program/ Project Budget	Requested Amount
Percent of Total Budget		
Purpose of Request		
Grant Period	<input type="text"/>	
Description of how grant funds will be used:		
Project Goals		
Project Objective (Measurable tasks)		

**How does this fit
within the
funders strategic
plan?**

**How will this
benefit the
community you
serve?**

Have you
previously
received a grant
from CARTF?

Was a 6 month report filed?

Yes

No