



## GRANT INFORMATION

### CHARITABLE FOCUS

The purpose of the Hobbs Foundation is to support those organizations whose work to benefit humanity is consistent with the charitable goals of the Hobbs family.

Grants will be primarily focused toward fulfilling needs that directly benefit children.

### GEOGRAPHIC FOCUS

Priority will be given to grant requests that benefit children in the state of Florida.

### GRANT CRITERIA

- Must be 501c3 organization with audited financial statements.
- Project must be 100% focused on children.
- No contributions will be made to general fund raising drives, endowment campaigns, political organizations, or for already completed projects.
- No grants will be awarded as substitution for public funds.
- Grants proposals will be accepted **September-December** for the 2011-2012 Grant Cycle.
- Grants will be awarded and distributed by **January 2012**.
- Grants (30) will be for one year in amounts of \$10,000.

### NOTIFICATION PROCESS

All grant requests will be reviewed for eligibility and the organization will be notified in writing whether or not the grant has been awarded during or before the month of December.

#### Mail Grant Applications to:

Hobbs Foundation  
300 Beach Drive NE, Suite 903  
St. Petersburg, FL 33701

Or via Email to (preferred):  
Amanda Long, Grant Administrator  
hobbsfoundation@gmail.com



## GRANT APPLICATION

### ORGANIZATION INFO

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

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Contact Person \_\_\_\_\_

Title \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Email \_\_\_\_\_

Web \_\_\_\_\_

Organization Mission: \_\_\_\_\_

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

### FINANCIAL INFO

Annual Budget: \_\_\_\_\_

Number of Employees: \_\_\_\_\_

% Budget to: \_\_\_\_\_% Programs

% Funding from: \_\_\_\_\_% Public

\_\_\_\_\_ % Fundraising

\_\_\_\_\_ % Private

\_\_\_\_\_ % Admin

\_\_\_\_\_ % United Way

Audited financial statements Y/N: \_\_\_\_\_ Auditor: \_\_\_\_\_

### PROJECT INFO

Amount Requested: \_\_\_\_\_ Total Project Budget: \_\_\_\_\_

Brief Project Description: \_\_\_\_\_

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

### ATTACHMENTS

- Proof of 501c3 Status
- Project proposal with description of benefits and individuals served
- Itemized listing of project costs
- Current financial statements (or web link)