

HawkFamily FOUNDATION Streamlined Grant Application

Date of Request: _____

Exact Legal Name of Organization: _____

Tax Exempt Status: 501(c)(3) Organization Tax ID Number: _____
(check block) _____ Other (specify)
Please attach a copy of IRS 501(c)3 determination letter

Year organization was founded: _____

Address: _____

Director: _____

Telephone Number: _____ E-mail Address: _____

Contact Person: _____ Phone Number: _____

Request Amount: _____ (please attach a program budget)

Type of Request: _____ Any Matching Funds: _____

Please indicate the timing requirement for funding your request below.

- Immediate/urgent need Within 6 months of request
- Capital Request or multi-year project

Please attach purpose for request (limit 1000 words)

Mission or Goal: _____

The Hawk Family Foundation will consider educational and philanthropic requests that benefit the citizens within our Lackawanna County community and region. The Foundation will consider multi-year requests for funding based upon the scope and circumstances of the request.

Our stewardship priorities are targeted toward Northeastern Pennsylvania:

- 1. Education - Scholarship and Capital Initiatives**
- 2. Health and Human Services support for the vulnerable -- especially children and seniors**
- 3. Prison Outreach and reentry**
- 4. Community and Culture - special initiatives and ongoing support**

The foundation's funds are limited each year. Therefore, due to the numerous requests received throughout the year we respectfully ask that you let us know your needs as soon as possible. Requests are evaluated based on our mission statement and granted on a first come, first serve basis.