|  |  |  |  |
| --- | --- | --- | --- |
| **Grant Renewal Application** | | | |
| Organization Name (*as it appears on 501(c)(3) letter*) or Fiscal Sponsor: | | | Date Submitted: |
| Address: | City/State/Zip Code: | | |
| Organization Phone Number: | | Website Address: | |
| Contact Name: | | Contact Title: | |
| Contact Email Address: | | Contact Phone Number: | |
| Grant Requested:  3-year (Future payments are not guaranteed and are contingent upon the receipt, review, and approval of a satisfactory grant report) | | | |
| Dollar Amount Requested: | | Name to appear on check: | |
| Total Project Budget (if applicable): | | Total Operating Budget: | |
| When does your fiscal year begin? (month/date) | | | |
| Month/Year of last grant awarded: | | Last Grant Amount: | |
| Project/Program Title (if applicable): | | | |
| Date of original/most recent full proposal referenced in this Grant Renewal Application: | | | |
| **Program Updates** | | | |
| 1. Have there been any organizational or program changes since the last proposal or grant period?   Yes (see question 1a.)  No (see question 2) | | | |
| 1a. If yes, were the changes explained in the most recent grant report?  Yes (Refer to grant report dated: \_\_\_\_\_\_\_\_\_ )  No (see question 1b) | | | |
| 1b. If changes were **not** provided in the grant report, please provide an explanation below:  *If there were major programmatic changes, please reach out about submitting a new full proposal* | | | |
| 1. Have your anticipated outcomes changed since the last grant period?  Yes  No   *If yes, please explain, unless it is explained in the grant report (We recognize that many outcomes cannot be quantified, such as changing rape culture; please do not create new systems of evaluation):* | | | |
| 1. Number of people to be served this grant period (if applicable): | | | |

***Please email an electronic version of the Grant Renewal Application to support[at]baskinfoundation.org.***