Application Summary of: CFSC | Dykstra, Laura

Organization and Contact Information		
*Legal Name of Organization:		
*Contact Name for this request:		
*Contact E-mail Address:		
*Contact Phone:		
The Giving Partner		
One of the requirements for this grant opportunity is a profile in The Giving Partner that reflects an Approved/Current status. Please visit The Giving Partner and type your organization's name into the search bar.		
Please copy and paste the link to your Giving Partner profile here:		
Once you have found your organization's profile, please look for its status underneath the organization name.		
Please select that status here.		
i Project Information		
If you have any questions or concerns along the way, please feel free to schedule a brief virtual meeting to discuss your application and review questions prior to submission. We want to make sure you're confident that your proposed organizational developments are fully expressed to our committee before any decisions are made. You can schedule a time to speak with Laura Dykstra from our team at this link: Click Here		
Project Information		
*Project Name:		

*Please describe your project. In your description of your project, please explain what problem your project addresses and how you propose to solve this problem through your project. 1-2 paragraphs, please		
*Which of these animal welfare priority areas does your proposal best support?		
*Is this an existing or a new program or area of funding?		
*Can you currently project an end date for this project?		
How many animals will this project serve?		
*Dogs		
*Cats		
*Other animals?		
Project Success		
*How do you define success for this program? How will you verify that this population has achieved success? What outcomes are you trying to achieve?1-2 paragraphs, please		
*What methods of collecting information will you use to determine this project's success? (examples: surveys, pre- and post-program testing, statistics, or anecdotal stories) 2-4 sentences, please		
Optional: Upload any additional information as attachments below: (Word, excel, pdf, or jpeg files only. Maximum file size is 10mb)		
Attachment 1:		
Attachment 2:		
Attachment 3:		
\$ Budget Information		
*Amount Requested:		

*If full funding is not available, would you like this request to be considered for partial funding?		
*Does the funding that you are requesting for this program reflect your TOTAL BUDGET for this program?		
Please upload a quote(s) below from any outside contractors or services included in your budget		
Quote 1:		
Quote 2:		
Quote 3:		
? Fund Specific Questions		
Please note that the Community Foundation will use the following questions to determine whether your project qualifies for some of our various funds. This section is meant to consider your project for funds that might not otherwise be considered, NOT to eliminate applications that do not qualify for these funds.		
*Is your organization located in Sarasota County?		
*Approximately what percentage of your project will serve Sarasota County?		
*Some of our funds are restricted for use in Sarasota County. If awarded a grant through one of these funds, would you be able to ensure that funding was spent to specifically on projects in Sarasota County?		
*What kind of animals will your project serve? *Domestic: an animal, that has been tamed and kept by humans as a work animal, food source, or pet, especially a member of those species that have, through selective breeding, become notably different from their wild ancestors.		
*Do you have a physical location in either the city of Sarasota, Bradenton, or Venice, Florida?		