



2019 Pennington Grants

Programs and projects impacting disadvantaged elderly and homeless elderly citizens of Lawrence County will be considered for funding through the following application methods:

- Intent form (*preferred method*)
 - Organizations may submit the one-page Intent Form for consideration (with no more than two pages attached). After LCCF review, organizations may be invited to apply for a Pennington grant with a traditional application packet following the timeline below.
- Traditional LCCF grant application
 - Organizations may submit a proposal (with required copies) through the LCCF Open Grant Cycle. The Open Grant Cycle timeline will apply to applications submitted in this manner.
- Renewal of past Pennington grant
 - The LCCF End of Grant Report must be returned before a grant would be considered for renewal. Organizations should submit the Intent Form for the program in consideration; renewal requests will still be subject to the competitive process and must be in by the intent form deadline below.

Organizations may submit multiple applications if more than one project is being proposed or if different groups will be served.

Organizations are encouraged to partner/collaborate if possible, to explain how you will target the specific group (disadvantaged elderly and/or homeless elderly), and to remember your mission as you plan your project. Salaries, fees, and using gift cards in your proposal are rarely approved.

Pennington Grant Timeline

March 27	Intent form deadline
April 10	LCCF response/invitation to apply
May 10	Pennington application deadline

Grant check distribution no later than July 12th 😊



PENNINGTON FUND GRANTS

(select group to benefit from grant)

- Elderly Disadvantaged
- Elderly Homeless

Intent Form

Organization name _____

Address _____

Phone _____

Email _____

Organization mission _____

Number of elderly served annually _____

Proposal title _____

Primary area of impact:

- Basic Needs
- Health & Wellness
- Social / Other _____

Estimated total cost of proposal \$ _____ Estimated proposal request \$ _____

Briefly explain your program or project:

Briefly explain the intended outcomes, including an estimation of the number of elderly to be impacted:

Date submitted _____

Contact person (printed name, signature, title) _____

Organization officer (printed name, signature, title) _____