

**E.L. & Z. IRENE HOPKINS FOUNDATION**  
Grant Application

**Mission of the Hopkins Foundation:**

The E.L. & Z. Irene Hopkins Foundation is a private foundation and its mission is to provide support and funding for programs that will help improve, in tangible ways, the quality of life and life circumstances of children and the people that serve children.

**Overall Criteria:**

The Hopkins Foundation Board of Directors primarily considers projects that will benefit children in Lyon County, Chase County, Morris County and Coffey County, Kansas.

**I. Application Cover Sheet:**

Please use this cover sheet as the first page of your proposal. No cover letters please.

Project Title: \_\_\_\_\_

Applicant: \_\_\_\_\_ Tax ID/FEIN: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Executive Director (or equivalent): \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Project Contact (if different):

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Request \$ \_\_\_\_\_ Request is \_\_\_\_\_ % of project budget

Is this a new or existing program?  New Program  Existing Program

Which county/counties will this project serve:  Lyon  Chase  Morris  Coffey  Other \_\_\_\_\_

Please use the space below (rather than an attachment) to provide a 50-word summary of the project:

Executive Director (or equivalent) signature: \_\_\_\_\_

## II. Narrative

Please use a separate attachment to answer the following questions in the order presented. Limit your total response to **four** pages, using standard one-inch margins, single-spacing and 12-point font.

1. What is the resource situation, problem or opportunity this project will address?
2. Who or what is the population that this project will serve?
3. What is the timeline for achieving the objectives of the proposed project?
4. Are there other matching funds through your organization, its members, or other traditional sources of support or earned income for the proposed project? If so, please explain.
5. What funding sources have been approached for this specific project and what have the responses been?
6. Provide any applicant history that demonstrates sound management and financial practices, successful initiatives similar to the stated project on this application, and the applicant's willingness and ability to honor and implement prior commitments, representations, and initiatives to the Foundation and others.
7. Will the applicant be successful in continuing the grant initiative beyond the life of the grant by attracting predictable sources of revenue without any further support from the Foundation? Please explain.
8. What other sources of funding (public or private) have historically supported activities concerning this (or like) projects within your organization?
9. Describe how the scope and size of this project will have a demonstrable, visible and significantly positive impact.
10. What present and future recognition would be proposed to recognize The Hopkins Foundation in the implementation of this project?
11. In what way (if any) would the Foundation's support prove to be "seed money" that would attract future or additional support, from any source, and generate future income for or the ability to provide additional integral services by the applicant?
12. What will be the specific, meaningful outcomes of this project? How will the success of this project be measured?

## III. Required Attachments

- Proof that organization is a 501(c)(3) entity
- List of officers and board members and their principal occupations
- Most recent financial statement or Form 990
- One-page budget for the project, showing proposed revenues and expenses
- If applicable, partnering organizations' contact information

**Submit 7 stapled copies of your proposal to  
E.L. & Z. Irene Hopkins Foundation  
4820 West 143<sup>rd</sup> Terrace, Leawood, KS 66224  
(913) 269-6428**

We affirm that The E.L. & Z. Irene Hopkins Foundation may confer and share information regarding this application with other foundations and funding agencies as it relates to the programs identified within this application.