



FOUNDATION FOR
APPALACHIAN OHIO
Give. Grow. Create.

Donald R. Myers Legacy Fund to Support Partnership in Appalachian Ohio

GRANT APPLICATION

The Donald R. Myers Legacy Fund was created to support projects and activities of organizations in the 32 Appalachian counties in Ohio that improve quality of life with emphasis on concerns Mr. Myers worked so passionately to address: education, regional networking opportunities, support for community leaders, and fulfillment of basic needs.

DATE: _____

APPLICANT NAME: _____

NAME OF CONTACT PERSON: _____

STREET ADDRESS: _____

CITY, STATE & ZIP: _____

PHONE: _____ ALTERNATE PHONE: _____

EMAIL ADDRESS OF CONTACT PERSON: _____

NAME OF PROJECT: _____

TOTAL PROJECT BUDGET: \$ _____

AMOUNT OF GRANT REQUESTED: \$ _____

Please Note: Maximum grant award is \$600. Projects where a grant award will make a significant impact on the overall budget will receive the greatest consideration.

PROJECT NARRATIVE

The project narrative should provide details of the project or activity and how it will be implemented. Please include how the project or activity is related to the purpose of the Donald R. Myers Legacy Fund and which of the four areas closest to Mr. Myers’s heart the project is addressing.

The Donald R. Myers Legacy Fund was created to support projects and activities of organizations in the 32 Appalachian counties in Ohio (list on page 4) that improve quality of life with emphasis on concerns Mr. Myers worked so passionately to address:

- education,
- regional networking opportunities,
- support for community leaders, and
- fulfillment of basic needs.

BUDGET DETAILS

I. **Tangible Items to be Purchased** \$ _____

Please provide general description of items:

II. **Publicity and Communication** \$ _____

(if applicable)

III. **Other (please identify):** _____ \$ _____

IV. **Other (please identify):** _____ \$ _____

TOTAL PROJECT BUDGET: \$ _____

APPLICATION CERTIFICATION

The undersigned certifies that he or she is authorized by the governing or corporate body of the applicant to represent the applicant in both requesting and accepting the proposed grant funds and to the best of his or her knowledge the information contained in this application is correct.

Name of Authorized Representative

Title of Authorized Representative

Signature of Authorized Representative

Date

Application Deadline: March 14, 2016

Please mail or email the completed grant application to:

Mail:

Donald R. Myers Legacy Fund
Foundation for Appalachian Ohio
Attn: Kelly Morman
PO Box 456
Nelsonville, OH 45764

Email:

kmorman@ffao.org

Please use "Myers Legacy Fund Application" as your subject line.

Please call the Foundation at 740.753.1111 with any questions.

And remember to retain a copy of the completed application for your records.

32 Appalachian Counties in Ohio

Adams, Ashtabula, Athens, Belmont, Brown, Carroll, Clermont, Columbiana, Coshocton, Gallia, Guernsey, Harrison, Highland, Hocking, Holmes, Jackson, Jefferson, Lawrence, Mahoning, Meigs, Monroe, Morgan, Muskingum, Noble, Perry, Pike, Ross, Scioto, Trumbull, Tuscarawas, Vinton, Washington