**AmeriCorps Grant Application: *Letter of Intent (LOI)***

**Name of Legal Applicant Organization:** Click or tap here to enter text.

Type of Organization (Nonprofit, Government, etc.): Click or tap here to enter text.

Organization Address: Click or tap here to enter text.

City, State, Zip: Click or tap here to enter text.

Telephone: Click or tap here to enter text.

email: Click or tap here to enter text.

**Program Title:** Click or tap here to enter text.

**Executive Summary, 500 words maximum**

**Please fill in the blanks of these sentences to complete the Executive Summary. Do not deviate from the template.**

### The [Name of the organization] proposes to have [# of] AmeriCorps members who will [member service activities] in [locations AmeriCorps members will serve]. At the end of the first program year, AmeriCorps members will be responsible for [anticipated outcome(s) of project]. In addition, the AmeriCorps members will leverage [number of leveraged community volunteers, if applicable] who engage in [what the leveraged volunteers will be doing.]

### This program will focus on the CNCS focus area(s) of [Focus Area(s)]. \* The CNCS investment of $[amount of request] will be matched with $[amount of projected match], $[amount of local, state, and federal funds] in public funding and $[amount of non-governmental funds] in private funding. *(Fixed Amount grant applicants should list ‘other revenue’ because they are required to contribute additional resources to operate the program.)*

 \*If the program is not operating in a CNCS’ focus area, omit this sentence.

**Program CNCS Focus Area(s):** Click or tap here to enter text.

**CNCS Funds Requested:** Click or tap here to enter text.

**Member Service Years Requested:** Click or tap here to enter text. **Members Requested:**Click or tap here to enter text.

**Total Project Budget (funds requested + match):** Click or tap here to enter text.

**Primary contact person, list secondary contact if applicable:** Click or tap here to enter text.

[ ] Check box if you are not funded competitively and your program intends to apply for Formula Funding.