



GRANT PROPOSAL COVER SHEET

ORGANIZATION NAME		
ORGANIZATION ADDRESS		
ORGANIZATION PHONE	ORGANIZATION WEBSITE	
CONTACT NAME		CONTACT TITLE
CONTACT EMAIL		AMOUNT REQUESTED
FOCUS AREA (Check all that apply) Click here for more info on our focus areas		
<input type="checkbox"/> Education <input type="checkbox"/> Community Development <input type="checkbox"/> Health & Human Services		

SUMMARY OF REQUEST (2-3 sentences max)

COMMUNITIES SERVED BY YOUR PROJECT [Click here for a list of the Communities we serve](#)

LIST ANY BOARD MEMBERS AFFILIATED WITH CENTERPOINT ENERGY *(Not required to be considered for funding)*

LIST ANY VOLUNTEERS WHO ARE EMPLOYEES OF CENTERPOINT ENERGY

HAVE YOU RECEIVED FUNDING FROM CENTERPOINT ENERGY BEFORE? IF YES, PLEASE LIST DATES AND AMOUNTS

Yes No