



**THE TRIMBLE
FOUNDATION
PO Box 7066
Hilo, HI 96720**

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**Hawaii Association
for Family and
Community Education**

APPLICATION FOR ORGANIZATIONS

Name of Organization _____

Address _____ City _____ Zip _____

Telephone _____ E-mail _____

Name of Administrator _____

Description of Organization _____

Number of Years Organization has been in Hawaii _____ Target Group _____

Project Description _____

Number of People Reached _____ Amount Requesting _____

What will the monies be used for? _____

Will you be receiving other funding? (Circle one) Yes No

If Yes, from whom _____ How much? _____

Is the copy of the IRS Determination Letter attached? Yes No

If No, please explain _____

I certify the above information is correct to the best of my knowledge.

Print name _____ Title _____

Signature _____ Date _____

NOTE: ALL GRANT RECIPENTS MUST SUBMIT A WRITTEN EVALUATION TO THE TRIMBLE FOUNDATION UPON COMPLETION OF USE OF FUNDS.

Please mail this application with your required forms to:

The Trimble Foundation
P O Box 7066
Hilo, HI 96720

Must be postmarked by July 31

Revised 01/23

Founded in Memory of Alice P. Trimble, First Hawaii State Leader, Cooperative Extension Service