



## LETTER OF INTENT COVER PAGE

The Letter of Intent application is the first step in the grant making process. Please review The Jewish Fund's Guidelines for Grant Requests before submitting your application. (Note: You may scan or reproduce this form or e-mail [mayer@jfmd.org](mailto:mayer@jfmd.org) to request that it be e-mailed to you in template form).

Name of Organization: \_\_\_\_\_  
(Please use full legal name as shown on your 501(c)(3) or other qualified tax-exempt status designation)

Street Address/PO Box: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_ E-mail: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Chief Executive Officer/Executive Director: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Board Chair/President or Chief Volunteer Officer: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**(please note: original signatures are required for both individuals)**

Please indicate which of the following priority areas are most applicable to your project:

- Health care and social welfare needs of vulnerable/at risk populations within the Jewish community;
- Programs that address the priorities and program initiatives of DMC/Sinai Hospital;
- The health care needs of vulnerable/at risk populations in the general community;
- Efforts to further positive relationships between the Jewish Community and the Detroit community.

Title of Program: \_\_\_\_\_

Purpose of Program (one sentence): \_\_\_\_\_

Program's Total Estimated Cost: \$ \_\_\_\_\_

Total Amount Requested from The Jewish Fund: \$ \_\_\_\_\_ Number of years: \_\_\_\_\_

Amount Per Year: \$ \_\_\_\_\_

Anticipated Total Contribution From Other Sources (indicate in-kind as well): \$ \_\_\_\_\_

Organization's financial contribution (indicate in-kind as well): \$ \_\_\_\_\_

Program's target population (demographic characteristics): \_\_\_\_\_

Send 1 original of this Cover Page and the Executive Summary (continuation funding requests must submit a Progress Report instead of Executive Summary), and 1 set of the required attachments (IRS letter, audit, organization brochure and/or annual report), BUT DO NOT STAPLE, to:

**The Jewish Fund  
6735 Telegraph Road  
Bloomfield Hills, Michigan 48303-2030**