

2018 GRANT APPLICATION

Grant Number: FOSPF-2018-_____ (office use only)

Date: _____

Amount Requested: \$ _____

Contact Name(s): _____

Division/Unit: _____

Mailing Address: _____

Phone Number: _____

E-mail Address: _____

Name of Program/Equipment requesting funding for: _____

Provide a brief description and the need for the program/equipment (use additional paper if needed):

Has this program/equipment previously been requested through the City budget? YES NO

If yes, please list the most recent date of submission and the result:

If no, please explain the reason why it was not submitted:

What objectives will be accomplished if the funding is granted?

How can the foundation evaluate success if the funding is granted? (# of people served, objectives reached, surveys, etc.)

Please list and attach an itemized list for expenses or a quote from equipment manufacturer on vendor's letterhead (include shipping and handling costs).

Has your Commanding Officer (Captain and above) approved this request? YES NO

Name of Commanding Officer (Captain and above): _____

Signature of Commanding Officer (Captain or above): _____

All grant requests should be accompanied by correspondence through your chain of command.

Please include ample justification for the items requested and an explanation of how it will be used. Note that among other aspects of our guidelines, consideration will be given as to how the grant fits within the mission of the Department as well as the current framework and deployment strategies. Divisions assume responsibility to ensure all items received are entered into City inventory.

If you have any questions, comments or concerns, please contact Rene Arcemont at:

friendsslidellpolicefoundation@gmail.com

Slidell, Louisiana

www.friendsoslavellpolicefoundation.org

ALL QUESTIONS MUST BE ANSWERED AND A QUOTE OR INVOICE OF COST ATTACHED.

SEND ALL PAPERWORK TO CHIEF OF POLICE FOR PROCESSING