



Georgia Ornithological Society

FOUNDED 1936

Grant Request Form for GOS Opportunity Fund

Section 1 – Organizational (A) or Personal Information (B)

A. Organizations

Application Prepared, Date: _____

Legal Name of Organization* _____

Federal Tax ID number: _____

Mailing Address, Street: _____

City: _____ State: _____ Zip: _____

Program Contact Person: _____

Contact Person Title: _____

Telephone: _____ FAX: _____

Alternative Phone: _____ Email: _____

Organization's Primary Mission:

Year Founded _____

**If an Organization is serving as a fiscal agent for another organization, the name of the Organization should read "Organization X fiscal agent for Organization Y" and the mailing address should be the fiscal Organization's address.*

B. Individuals

Name: _____

Address: _____

Social Security Number _____

Telephone: _____ Email Address: _____

Please submit a current résumé which details educational background and employment history.

Section 2 – Program Information (Organizations and Individuals)

What is the purpose of the program/research?

How will this effort benefit ornithology and/or conservation?

Have you or your organization conducted similar types of programs or research in the past? When? (If so, please provide copies of relevant report summaries.)

Describe your study design and study area:

Do you anticipate needing follow-up money in the future?

Total Program/Research Budget \$ _____

Amount Requested from GOS \$ _____

Section 3: Budget Details

Complete the budget form for the requested project below or on a separate sheet

Income	Secured Funding	GOS Funding
Individuals		
Corporate		
Special Events		
Foundations		
Gov't Funding		
Total		
Expenses		
Personnel & Benefits		
Overhead		
Supplies		
Travel		
Communication		
Other		
Total		

I certify that my public or private organization [mark an 'X' next to each item]:

1. Is a non-profit or an agency of the government

2. Has an accounting system or fiscal agent

3. Has a 501c 3 status letter

4. If private, not for profit, has a voluntary board

I/We agree to

5. Provide biannual status reports to GOS as to how the funds are spent

Application submitted by _____

Signature _____