

Regeneration Works
Launch Pad Coaching Grants Application Form

GENERAL INFORMATION

Organization Name: _____

Historic Place Name: _____

Place Address: _____

Charity or Not For Profit: _____

Charitable # / Business Registration #: _____

Organization Website: _____

Place Website (if different from above): _____

Project Contact Name: _____

Project Contact Phone Number: _____

Project Contact Email Address: _____

How many volunteers do you have?

How many paid, full-time staff do you have?

GRANT SPECIFIC QUESTIONS

Please tell us which grant category you are interested in (choose one)

- Fundraising
- Revenue Generation
- Sponsorship
- Business Planning
- Telling your story/Marketing

What are your coaching needs? (Please include as much information about your place, your approach to the project and list any current partnerships. You can find more information on the types of grants here).

Please provide background information on any past activities or plans that your team has completed for this project. (Please leave an NA in the box if there have been no past activities.)

Tell us more about your team’s capacity to make this project happen. Include all the tools you have – staff and volunteers and their skill sets, social media, tools & resources.

How will getting this coaching grant move your project forward?