Breastfeeding, Farm to ECE and Nutrition Funding Application

**Applications are due by 11:59 PM ET on Wednesday, July 23, 2025.**

**Need support writing and/or submitting your application? Contact G-SPAN at gspanatghpc@gsu.edu**

# Applicant Contact Information

|  |  |
| --- | --- |
| **Organization Name** |  |
| **Primary Contact Name** |  |
| **Primary Contact’s Email Address** |  |
| **Address** |  |
| **County** |  |
| **Phone Number** |  |

# Scope of Work

Which priority issue does your project address (select 1):

|  |
| --- |
|[ ]   **Nutrition** |
|[ ]  **Early Care and Education** |
|[ ]  **Breastfeeding** |

## Project Title

|  |  |
| --- | --- |
| **Title** |  |

## Detailed Project Summary

(character limit: 3,000 characters)

* **Describe your project. How do you plan to use the funds?**
* **Will the funding support an existing project or is this a new project? If this funding supports an existing project, how is the existing project funded?**
* **If you are requesting funds for equipment, list the equipment and how it will be used.**

## Priority Populations

* **List the people and groups who will benefit from your project. Think about those who will benefit directly and indirectly. Please estimate the number of people who will benefit.**
* **Explain how they will benefit**

# Timeline

**Instructions:**

* Please use the template to outline your timeline.
* Add rows as needed.
* Make sure your activities are listed in a logical order and your timeline is realistic.

|  |  |
| --- | --- |
| **Activity** | **Anticipated Completion Date** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

# Budget

**Instructions:**

* Please use the template to outline your budget.
* Add rows as needed.
* Write the grand total sum in the final row.
* Make sure your budget aligns with the activities listed in your timeline.

|  |  |  |  |
| --- | --- | --- | --- |
| **Description of Item**  | **Unit Cost** | **Number of Units** | **Total Item Cost** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Grand Total:**  |

# Budget Justification

**Explain:**

* **The purpose of each item in your budget.**
* **How you arrived at the dollar amount for everything in your budget.**
* **If you plan to use funds for equipment, explain how the equipment will be used and maintained.**