



2024 Community Impact Grant Application

1. Name of Organization: _____

2. Name of Charity Contact: _____ Phone: _____

Address: _____ Email: _____

3. How long has your organization been in Bartow County? _____

4. Please provide a brief description of the services your organization provides to/for children or those in need.

5. How many children or people in need have you served in the past year? _____

6. What is your annual budget? (Attach if available) _____

7. Please list all funding sources and approximate percentage they contribute to your yearly budget.

8. Please indicate how much money you are requesting and the ways in which your CSL Grant will be allocated. Please be as specific as possible.

9. Additional comments or concerns you wish the CSL Grant Committee to consider:

Please return completed application to:

Cartersville Service League

c/o Tori Brumlow

6 Limerick Ct.

Cartersville, Georgia 30120

Or e-mail to Tori Brumlow at:

CSLCommunityImpactGrants@gmail.com

*CSL Grant funds are to be used for services and programs that directly benefit the most vulnerable members of our community. Salaries and administrative costs do not fall under this requirement.