

The Reinberger Foundation
SAMPLE On Line Application

Letter of Inquiry

General Information

Legal Name Organization Name

Tax ID

Address

City State Zip code

Phone Web Address

Organization Background Information

Mission Statement (limit of 100 words)

Background/History of your Organization (limit of 250 words)

Previous year's approximate operating budget

Do you perform an annual audit?

Yes/No

Have you had a modified opinion on your audit in the past 5 yrs? **Other than "clean" opinion**

Yes/No

Contrary to its connotation, a qualified opinion is not a good thing. Auditors that deem audits as qualified opinions are advising whoever is reading the document that the information within the audit is not complete or that the accounting methods used by the company do not follow GAAP.

Organization Classification

Please select the classifications that best describe your Organization:

Organization Type

If Other please describe:

Arts and Culture

Education

Healthcare

Human Service

Other

Organization type defines which program area is appropriate for your application. A museum requesting support for an educational program should apply in our Arts, Culture and Humanities program area with a December 1 deadline.

Geographical Area Served
(more than one may be selected)

Northeast Ohio *broad service to the area*

If Other please describe

Cuyahoga County

Geauga County

Lake County

Lorain County

Median County

Summit County

Greater Columbus *broad service to the area*

Franklin County *service within the county only*

Ohio

Other

Nationally

Primary Organization Contact (i.e. Executive Director)

Prefix First Name Middle Name/ Initial Last Name Suffix

Title

Office Phone Extension Email

__correspond regarding this request to the above

Primary Request Contact (i.e. Program Coordinator)

_Same as Organization Primary contact

Prefix First Name Middle Name/ Initial Last Name Suffix

Title

Office Phone Extension Email

__correspond regarding this request to the above

Project Details

Project Title (limit of 20 words)

Please provide a brief project description (limit of 500 words)

(only use as many/few words as needed to state the purpose of your project)

Project Budget

(N/A if requesting General Operating support)

Request Amount

Project Classification

Please select the classifications that best describe this particular project:

Geographical Area Served

Northeast Ohio *broad service to the area*

If Other please describe

Cuyahoga County

Geauga County

Lake County

Lorain County

Median County

Summit County

Greater Columbus *broad service to the area*

Franklin County *service within the county only*

Ohio

Other

Nationally

Program Area

Arts, Culture and Humanities

Arts Education

Media and Communication

Museums

Botanical

Performing Arts

Dance

Music

Theater

Public Recreation

Visual Arts

Zoos

Education

Vocational/ Workforce Development

Adult Education and Literacy

College Access

Higher Education

K-12 Education

Early Childhood

Libraries

Healthcare

- Support for healthcare for underserved
- Hospices
- Hospitals and clinics
- Medical and Disease research
- Mental Health Services
- Prevention
- Substance Abuse

Human Service

- Children and Youth
 - Camps
 - Childcare
 - Education
 - Disabled
 - Youth Development
 - Other
- Domestic Violence
- Emergency Food
- Geriatrics
- Residential and Home Care
- Temporary Housing/Homeless Shelter
- Other

Support of Philanthropy

Other

The earlier example of a museum would here select "Early Childhood" or "K-12 Education".

Type of Support

- Capital Campaign
- Challenge Grant
- General Operating Support
- Project Support
- Other

If Other please describe: