



NEW FAIRFIELD Community Foundation

Letter of Intent

Name: _____

Email: _____

Address: _____

City: _____ State: _____ Zip: _____

How did you hear about the Foundation?

What is the proposed project? What is the significance or uniqueness of this project in relation to other work being done in this field within New Fairfield and/or the greater New Fairfield community? _____

What documented need/opportunity is being addressed by this project?

Please Send Completed Form To:
New Fairfield Community Foundation
1 BRUSH HILL ROAD, SUITE 307
NEW FAIRFIELD, CT 06812-2667
P: (203) 746.9833 | F: (203) 312.8245
E: info@newfairfieldfoundation.org
W: www.newfairfieldfoundation.org

What are the objectives of this project?

Why is the project important? How will the community benefit?

What is the total cost of the project and the specific amount you plan to request from the New Fairfield Community Foundation?

If your organization already has committed or pending partial funding for this project, please include this information. In addition, please reference other funding sources you plan to also approach for the proposed project.

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What outcomes are expected from this project?

Signature

Date

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