

RUTGERS COMMUNITY HEALTH FOUNDATION

Aiding the Health Needs of New Jersey Since 1987

P.O. Box 1265

New Brunswick, NJ 08903-1265

Email: info@rchfoundation.org

Web Site: www.rchfoundation.org

LETTER OF INTENT –COVER PAGE General Operating Support

Date: _____

Name of Applicant Organization: _____

Applicant Address: _____

Name of Organization's Executive Director: _____

Telephone #: _____ E-Mail Address: _____

Primary Target Population: _____

Geographic Area: _____

Agency Fiscal Year: _____ to _____

Website Address: _____

Request for funding:

Fiscal Year	Request of RCHF (\$)	Total Organizational Budget (\$)

Continued on next page

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Prior Support from RCHF (list three most recent grants):

Grant Dates	Project Title	RCHF Award (\$)

Organizational Purpose

Insert organization mission and purpose statement in this box.

Attach narrative in the following format (max two pages, single-spaced, 11-point Font):

1. Organization history and detailed description of primary service region.
2. Primary services and major programs.