

Grant Recommendation Form

Name of advisor(s) making suggestions: _____

Name of fund: _____

As advisor(s) to the above Fund, I/we suggest that the Jewish Community Foundation consider the following grant recommendations:

AGENCY NAME: _____ AMOUNT: _____

MAILING ADDRESS: _____

PHONE: _____

CONTACT NAME: _____

GRANT PURPOSE: _____

If you would like this grant to be anonymous, please indicate below:

Advisor name anonymous Fund name anonymous Anonymous in JCF publications

AGENCY NAME: _____ AMOUNT: _____

MAILING ADDRESS: _____

PHONE: _____

CONTACT NAME: _____

GRANT PURPOSE: _____

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I/we understand that the above requested grants may not be used to satisfy the payment of any pledge or other personal or corporate financial obligation, or provide goods or services or benefits of a personal or corporate nature to any individuals or entities as a condition of this grant.

I/we further understand that final judgment on all grant awards rests with the Board of Trustees of the Foundation whose charge it is to see that all distributions are within the purposes of the Jewish Community Foundation of Greater Hartford, Inc.

Signature of Advisor

Date

Signature of Advisor

Date

**Please complete and submit this form online at www.jcfhartford.org
or fax or mail to the Foundation office.**