



**Pittsburgh Community Benefit Fund
Project Application**

Project Information

Project title	
Organization or group name	
Telephone number	
Email address	
Mailing address	
Total cost of the project	
Amount requested from PCBF	
Name and title of applicant (person responsible for managing the project)	
Mailing address of applicant	
Email address of applicant	
Telephone number of applicant	

Please sign below to:

- Certify that you have the authority to bind the organization/group. And,
- Certify that the information provided in the application form is true and accurate to the best of your knowledge.

Applicant signature: _____ Date: _____

Submit your completed application and any attachments to info@pcbf.org by the deadline:
February 1 at 11:59pm.

You may wish to submit photos with your application.



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Question 1: Tell us about your organization/group:

Question 2: Provide a description of the project:

Question 3: What is the overall objective(s) of the project?

Question 4: Describe your organization's ability and capacity to successfully manage this project. How will your project be designed, managed and delivered?

Question 5: What are the project timelines? Include any special considerations regarding the timing or urgency of funding.



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Question 6: Describe the benefits of the project to the Former Pittsburgh Township Community. The PCBF seeks to provide funding that has the widest benefit on the community and the longest lasting impact.

Question 7: Provide the proposed budget detailing revenue and expenditure projections.

Question 8: Please list all other funding agencies or sources your group/organization has applied to, including cash or in-kind. Please note if funding is confirmed or pending.

Question 9: What internal fundraising has been conducted by your group/organization to defray the costs associated with the request?