

# HWF Grant Request - Previous Grantee

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## *The Henderson-Wessendorff Foundation*

### **Project Name\***

This Project Name will change after you submit. Once the change is made, please do not edit this field.

*Character Limit: 250*

### **The organization is seeking grant funds . . .\***

*Character Limit: 250*

### **Amount requested from The Henderson-Wessendorff Foundation:\***

*Character Limit: 20*

### **REQUEST CODING\***

Options listed below are used for internal classification purposes and do not represent the Foundation's areas of focus for grants. Please visit [www.hw-foundation.com](http://www.hw-foundation.com) for the Foundation's grant guidelines.

### **Target Population**

Choose the best option.

*Character Limit: 100*

#### **Choices**

Abuse/Neglect Victims  
Developmentally Disabled  
Disaster Victims  
Economically Challenged  
General Population  
Health Conditions/Illnesses  
Homeless  
Mental Health  
Physically Challenged  
Substance Abuse Victims  
Unemployed/Underemployed  
Other

### **Program Area\***

Choose the best option.

#### **Choices**

Animals  
Community Development  
Education

Employment  
Environment  
Food, Agriculture & Nutrition  
Government  
Health & Wellness  
Housing  
Human Services  
Legal  
Public Safety  
Recreation & Sports  
Religion  
Science & Technology  
Social Science, Culture & Humanities  
Other

### **Geographic Area\***

Choose the best option.

#### **Choices**

Richmond  
Rosenberg  
Fort Bend County  
Greater Houston  
Blanco Area  
Texas  
Other

### **Funding Type\***

Choose the best option.

#### **Choices**

Construction  
Equipment  
Land Acquisition  
Operating Support  
Program Development/Support  
Research  
Scholarships/Endowments  
Other

### **Age Group\***

Choose the best option.

#### **Choices**

Infants to Preschool (under 5 years)  
Children & Youth (0-19 years)  
K-12 (5-19 years)  
Adolescents (13-19 years)  
Adults  
Senior Citizens

All Ages

**Describe the issue/need to be addressed.**

*Character Limit: 3000*

**What short and long-term outputs or outcomes will be achieved?**

Include how many constituents will be served.

*Character Limit: 1000*

**Anticipated time frame for use of grant funds:**

*Character Limit: 100*

**Total project, program or operating cost:**

*Character Limit: 20*

**Amount of funds received to date in support of the project, program or operations:**

*Character Limit: 20*

**List funding requests which remain outstanding:**

*Character Limit: 500*

**Mission Statement**

*Character Limit: 300*

**Upload a one page cover letter on organization letterhead.\***

This letter should be signed by your Executive Director indicating that they approve of this Letter of Inquiry submission.

*File Size Limit: 2 MB*