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**Letter of Intent (LOI) Form**   
*Community Impact Grant Funding Application*

**Using the format below, print and sign on your agency letterhead. Once completed please email to:** [**jvalentine@uwrandolph.org**](mailto:jvalentine@uwrandolph.org)

**Date:**

**Agency Name:**   
**Contact Person:**   
**Position/Title:**   
**Address:**   
**Phone Number:**  
**Email Address:**

* **Mission Statement:**   
  [Provide a brief overview of your organization’s mission and core objectives.]
* **Key Programs and Services:**   
  [List the primary programs or services your agency provides, focusing on those relevant to this application.]
* **Target Population Served:**   
  [Describe the primary population your organization serves, including demographics and geographic reach.]
* **Program/Project Title:**   
  [Provide the name of the program or project for which you are seeking funding.]
* **Brief Description:**   
  [Describe the program/project in a few sentences, outlining its purpose and objectives.]
* **Alignment with United Way Priorities:**

[Describe how your program aligns with United Way’s focus areas, such as health, education, or financial stability.]

* **Amount Requested:**   
  [Specify the amount of funding you are seeking.

By signing below, I confirm that the information provided in this Letter of Intent is accurate and complete to the best of my knowledge.

**Signature**

**Name:**

**Title:**