



# GRANT APPLICATION

## APPLICANT AND DEPARTMENT INFORMATION

First Name

Last Name

Title/Position

Organization/Department

Department Tax ID #

Address 1

Address 2

Shipping Address (Required even if same as above)

City

State

Zip

Organization Phone Number

Organization Phone Ext

Alternate Contact Name  
(Must be different from main contact/applicant)

**Alternate Contact Number**  (xxx-xxx-xxxx)

**Alternate Contact Ext**

**Alternate Contact Email Address**

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**Communities Served**

**Population**

**Number of Runs/Calls for Service Per Year**   
(for fire, EMS and police only)

**Local Approval Pre-Qualifications**  
(select the option that applies to your department/organization)

- As required by our community, this request has been presented and approved by our local government as part of our process when applying for external funding.
- Our jurisdiction requires approval from local officials once the award is granted.
- Our jurisdiction does not require pre-approval from local officials.

» **NEXT**



# GRANT APPLICATION

Welcome to Firehouse Subs Public Safety Foundation's digital grant application site. Thank you for your interest in applying for a grant.

The grant application portal is temporarily closed for review of pending grants. We will reopen the site on the first of the month for all new grant requests.

## Quarterly Application Deadlines:

- Thursday, November 30, 2017 at 5:00 PM EST for 1st Quarter Grants (Q1 2018)

## Notes:

U.S. applicants, please note, the application process is entirely digital. Please pay close attention to the FAQs and notes as you complete your online grant application.

Canadian applicants, the Firehouse Subs Public Safety Foundation of Canada operates as a separate entity from the U.S. organization, Firehouse Subs Public Safety Foundation, Inc. with a different application process. To learn more and/or request a grant application, email [CanadaFoundation@firehousesubs.com](mailto:CanadaFoundation@firehousesubs.com).

### APPLICANT AND DEPARTMENT INFORMATION

First Name		Last Name		Department Tax ID#	
Organization/Department		Email Address			
Alternate Name			Alternate Email		
Address Line 1			City		
Address Line 2			State		Zip
Organization Phone Number	Alternate Contact Number	Communities Served	Population	Number of Runs Per Year	

Local Approval Pre-qualifications will be detailed in the digital grant application.

### APPLICATION REQUEST INFORMATION

The type of grant you are requesting: (Equipment Donation/Prevention Education Items or Scholarships/Continuing Education)		What is the EXACT cost of the equipment?	
Variances in the amounts requested will be the responsibility of the grant recipient to pay directly.			
What Equipment are you requesting for your department?		Briefly explain how the equipment will benefit your community and your department.	
This would have a direct impact on more than ____ children in our community.		This would have a direct impact on more than ____ senior citizens in our community.	
How do you plan to use the funds requested? (for scholarships/continued education requests only)			
What is the amount of funding you are requesting? (for scholarships/continued education requests only)		Please provide a detailed description of how the funding will assist your department. (for scholarships/continued education requests only)	

### COMMUNITY IMPACT

Have you successfully reached out to the city for funds to purchase the equipment?		Was there a particular instance where a life would have been positively impacted if you would have had the equipment available?
What positive effects will the equipment specifically have? Please use statistics when possible.		

### FIREHOUSE SUBS RELATIONSHIP

Name of franchisee of the Firehouse Subs nearest you.	Address of Firehouse Subs location nearest you.	How far is this location from your department? ____ Miles
How did you hear about our organization?		Has your department received funding from Firehouse Subs Public Safety Foundation in the past?

If approved for funding, we may host a press event at the Firehouse Subs restaurant nearest you. We ask that all PR be coordinated by our Foundation. We will work in conjunction with your PR team as well as the PIO of your department.

PIO Email:	
PIO (Public Information Officer) Name:	PIO Phone Number:

Please note, there are different categories of funding within the grant application, therefore the printed PDF document may contain some open blank fields. Please do not contact the Foundation if fields appear blank.