



Adirondack Emergency Training Academy, LLC.
P.O Box 341– Ticonderoga, New York, 12883
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**The Adirondack Emergency Training Academy, LLC
AETA Training and Equipment Improvement Grant Application**

This grant is available for not-for-profit Emergency Medical Services and Fire Departments as well as municipal law enforcement. Only applications for funding for Training and/or Equipment purchase will be considered, all others will be discarded.

Name of Organization: _____ Contact Person: _____

Address: _____ City: _____ State: _____ Zip: _____

Contact Phone: _____ Contact Email: _____

Organization Tax ID Number: _____

Amount of Grant: _____

Purpose of Grant: _____

_____**Overview:** Background information on the organization including a brief history, a description of the activities or services carried out by the organization, and a list of officers and directors.

_____**Purpose of Request:** (a) A detailed description of the proposed project including the need the project is intended to address, (b) the scope of the project in terms of geographic area and population to be served, goals and objectives, (c) the plan of action and a timetable, the time period to be covered by the requested grant, and (d) the amount of the grant requested and the benefits to be derived.

_____**Finances:** Provide a current budget of the organization/cause, and if applicable, a budget for the project, showing sources of other funding and the use of funds. Also please provide a copy of the most recently completed Form 990.

Date Completed: _____ Signature: _____

FOR OFFICE USE ONLY

Date Received: _____ Received By: _____ Approval: _____