



## DISASTER RELIEF GRANT APPLICATION QUESTIONS

**IMPORTANT NOTE:** Below is a list of the grant application questions for your reference. Editing this document is restricted. You must download a separate copy of this document to your device in order to edit or make changes. Then you may save your own version separately.

**You must submit your application via the online form at this link:**

<https://app.smartsheet.com/b/form/1db2f1f56b524cc891f5a0fe4b50470a>.

The online form must be completed in one sitting. Therefore, we encourage you to prepare your responses offline using your own copy of this document, and return to the online form when you are ready to submit your final responses.

Please contact Sarah Morse with any questions or concerns: [s.morse@gatewaywf.org](mailto:s.morse@gatewaywf.org).

## DISASTER RELIEF GRANT APPLICATION

*Hurricane Helene Emergency Response*

### LIST OF QUESTIONS

*\*An asterisk indicates a required question.*

1. Organization Name\*
2. Organization Legal Name (if different)
3. Tax ID Number\*
4. Mailing Address\*  
*Include your organization's full mailing address, including city, state, and zip code. If awarded, this is where the grant check will be mailed.*
5. Contact Name\*  
*Enter the full name of the person to contact with questions regarding this grant application.*
6. Contact Email\*  
*Enter the email address of the person to contact with questions regarding this grant application.*
7. Contact Phone\*  
*Enter the best phone number to use to reach the contact person for this grant application.*

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8. County Located\*

*Please enter the name of the county where your organization's main office or headquarters is located.*

9. Counties Served by this Project (select all that apply)\*

- Burke County
- McDowell County
- Polk County
- Rutherford County

10. Project Name\*

*Enter a brief, descriptive title for your project.*

11. Amount Requested\*

12. Project Description\*

*Briefly describe how the requested funds will be used. These funds may be used to provide direct assistance to individuals affected by Hurricane Helene and/or support the applicant organization in recovering from or responding to Hurricane Helene.*

*Please briefly answer the following questions, if applicable to your request:*

- *What assistance will be provided or what will be purchased with the funds?*
- *What populations or communities will you help with this project?*
- *How did Hurricane Helene affect your organization and its ability to fulfill its mission?*

13. Other Funding\*

*Is your organization eligible for emergency public funding (local, state, or federal)? If yes, please explain.*

14. Other Information (optional)

*If not already addressed in the questions above, you may explain how the impacts of Hurricane Helene are affecting your organization or community.*