



PROJECT RESPONSIBILITY

Primary Contact: _____ Title: _____
 Team Lead Organization: _____ Telephone: _____
 Street Address: _____ Email: _____
 City, St/Prov, Postal Code: _____ Website: _____
 Organization Description: Non-profit Academic Government Agency Business

SUPPORT REQUESTED

Amount Requested (USD): \$ _____
 Project Duration (Months): _____

PROJECT SUMMARY

Project Title (10 words max.): _____
 RFP Topic Area: _____

Narrative Summary: Briefly (2-3 sentences) describe the actions your proposed project will take to improve the health of the Great Lakes ecosystem

STAY CONNECTED

How did you hear about this funding opportunity?

GLPF email Social Media GLPF website A colleague Other

Have you interacted with GLPF before this RFP? Yes No

If yes, please describe: _____

May we share this preproposal with other funders? Yes No