

# STATE JUSTICE INSTITUTE APPLICATION SUMMARY

<b>1. APPLICANT</b> a. Organization Name _____ b. Street/P.O. Box _____ c. City _____ d. State _____ e. Zip Code _____ f. Phone Number _____ g. Name & Phone Number of Contact Person _____  h. Title _____ i. E-Mail Address _____	<b>2. TYPE OF APPLICANT</b> (Check appropriate box) <input type="checkbox"/> State Court <input type="checkbox"/> National organization operating in conjunction with State court <input type="checkbox"/> National State court support organization <input type="checkbox"/> College or university  <input type="checkbox"/> Other non-profit organization or agency <input type="checkbox"/> Individual <input type="checkbox"/> Corporation or partnership <input type="checkbox"/> Other unit of government <input type="checkbox"/> Other _____ (Specify) _____
<b>5. APPLICANT FINANCIAL CONTACT</b> a. Organization Name _____ b. Street/P.O. Box _____ c. City _____ d. State _____ e. Zip Code _____ f. Phone Number _____ g. Name & Phone Number of Contact Person _____  h. Title _____ i. E-Mail Address _____ j. Organization EIN _____	<b>3. PROPOSED START DATE</b> _____  <b>4. PROJECT DURATION</b> (months) _____  <b>6. a. AMOUNT REQUESTED FROM SJI \$</b> _____ <b>b. AMOUNT OF MATCH</b> Cash Match \$ _____ In-kind Match \$ _____ <b>c. TOTAL MATCH</b> \$ _____ <b>d. OTHER CASH</b> \$ _____ <b>e. TOTAL PROJECT COST</b> \$ _____  <b>7. TITLE OF PROPOSED PROJECT</b> _____
<b>8. PROJECT SUMMARY</b>    	
<b>9. CERTIFICATION</b> <b>On behalf of the applicant, I hereby certify that to the best of my knowledge the information in this application is true and complete. I have read the attached assurances (Form D) and understand that if this application is approved for funding, the award will be subject to those assurances. I certify that the applicant will comply with the assurances if the application is approved, and that I am lawfully authorized to make these representations on the behalf of the applicant.</b>    	
SIGNATURE OF RESPONSIBLE OFFICIAL _____ (For applications from State and local courts, Form B - Certificate of State Approval, must be attached)	TITTLE _____ DATE _____