



## Letter of Inquiry

Please use this document to work on your LOI offline, if desired. DSYF encourages you to keep your answers as succinct as possible. Please try to limit your entire LOI submission to two pages. If DSYF wants to learn more, we will schedule a follow-up call with you. **Please review the eligibility criteria and grantmaking restrictions on our website before starting your LOI:** <https://dsyf.org/grantmaking/how-to-apply/>.

If you have questions about this form or the LOI process, please contact [esundell@dsyf.org](mailto:esundell@dsyf.org).

### Organization or Fiscal Sponsor Details

- Organization/Fiscal Sponsor Name and Legal Name
- Organization/Fiscal Sponsor Tax ID number
- Organization/Fiscal Sponsor Address

### Primary Contact Details

- Primary Request Contact
- Highest Ranking Contact (e.g. CEO, President)

### Project Details

1. Provide a description of your organization's mission, objectives, and services.
2. Program Title (*If you are asking for General Operating Support please use that as the title, not your organization name.*)
3. Why is there a need for your program?
4. What services do you provide?
5. Who delivers these services? Who receives these services? (*Please include the age range of participants.*)
6. Where is the program held? Where is the geographic region you are serving?
7. When (how often) do you provide these services?

### Budget Details

1. Total Organization Annual Budget (*Donated or in-kind services should not be included.*)
2. Total Youth Budget (*Donated or in-kind services should not be included.*)
3. Total Program Budget (*If applying for General Operating Support, this is the same amount as your Organization Annual Budget. Donated or in-kind services should not be included.*)
4. Amount Requested from DSYF

### Additional Information

- How did you hear about DSYF?