

Sunshine Community Trust Grant Application

Organization Information Organization Name: Address: Phone Number: Email: Contact Person: Title/Role: **Project Overview** Project Name: Grant Amount Requested: Project Start Date: Project End Date: **Brief Summary of Project** (500 words max):

Project Details

| 1. Describe the purpose of your project and the community need it addresses. | | | |
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| 2. Who will benefit from this project? | | | |
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| 3. How will the grant funds be used? (Provide a brief budget breakdown.) | | | |
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| 4. How will you measure the success of this project? | | | |
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| Mission Statement: | | |
| Year Founded: | | |
| Key Programs and Services: | | |
| Certification | | |
| I certify that the information provided in this a awarded, will be used solely for the purposes o | | funds, if |
| Signature: | Date: | |
| Printed Name: | Title: | |

Please submit your completed typed application along with a cover letter via email to:

Andre Nacaxe, CTFA (352) 483-5880 and re.nacaxe@united southern bank.com

Deadline for 2026 Applications:

Organization Background

September 30th 2025

