

NEW YORK STATE BOARD ADVERTISING, MARKETING & RECRUITMENT GRANT APPLICATION

DIVISION OR COUNTY INFORMATION

DIVISION/COUNTY NAME					
ADDRESS					
TELEPHONE NUMBER					
FAX NUMBER					
E-MAIL					
CURRENT MEMBERSHIP:					
MEMBERSHIP GOAL:					
YEARLY DUES ASSESSED:					
PRESIDENT OR OFFICER INFORMATION					
PRESIDENT OR RESPONSIBLE OFFICER NAME					
ADDRESS					
TELEPHONE NUMBER					
FAX NUMBER					
E-MAIL					



AS A CONDITION OF ACCEPTING THIS GRANT YOU ARE REQUIRED TO MAIL IN A REPORT THAT DETAILS EXACTLY HOW YOUR GRANT MONEY WAS USED. PLEASE INCLUDE ANY POSITIVE EFFECT ON MEMBERSHIP AND VISIBILITY AS WELL AS PICTURES AND PRESS COVERAGE WHERE APPLICABLE