Agency Name: 

Project Name: 

Project Location: 

Project Date(s)*:  
"If the date is flexible, please provide two or three potential dates that work for your organization."

Contact Person:  
Title:  
Email:  
Phone:  

Agency Address: 

Agency Website (if available): 

Non-profit organization?*  YES  NO  Status 
*Applicant organization must have 501c(3) status. Funded applicants may be required to provide proof of status.

What is your organization's mission statement?

Has JLS provided volunteers to your organization through DIAD before? If so, when? If you also received DIAD funding, how much?

Briefly explain the project, including its goals, community need, and history of the project's efforts to date:

Has the program been carried out by your agency before? If YES, what were the results of the program?

What are the demographics of your project's target population?
2019 – 2020 Done In A Day
Project Application

Number of people impacted each year from this project: ______________________________
Funds needed annually to support this project: ______________________________
Funding amount requested from the JLS to support this project: ______________________________
Would you accept partial funding? YES / NO

Please detail how this funding will be used (attached a proposed budget is desired):

How many volunteers are needed? ______________________________
How will our volunteers be used to carry out this project?

Will volunteers be broken into shifts? YES / NO If YES, please include details below:

If applicable, describe the community need related to K-12 education this project will fulfill:

Submitted By:

Name / Title ______________________________ Date ______________________________

On Behalf Of:

Organization ______________________________

For questions and assistance, please contact the Junior League of Savannah’s Done in a Day co-chairs, Kat Clark and Lindsey Eberley, at DIAD@jrleaguesav.org.