

FELDSTEIN MEDICAL FOUNDATION
Grant Application Cover Sheet

This Grant Application Cover Sheet must accompany each Grant Application.
Applications should be submitted online to: grants@feldsteinmedicalfoundation.org.

Name of Principal Investigator: _____

Organization, Position, Title and Department:

Principal Investigator mailing address:

Phone: _____ Fax: _____

E-mail: _____

Title of Proposal:

Amount Requested: _____

Organization's Tax-exempt status and IRS tax identification number:
