



# WYOMING WILD SHEEP FOUNDATION GRANT APPLICATION

Prior to completing this application, please review the Funding Priorities located

**Project Title:**  
*80 character limit*

**Organization Name:**

**Project Lead:**

Name

Email

Phone

Mailing Address

City, State, Zip

**Additional Point of Contact** *(if different from Project Lead):*

Name

Email

Phone

Mailing Address

City, State, Zip

**Project Type** *(select all that apply):*

Disease

Land Conservation

Action

Education and Outreach

Population Management/Monitoring

Habitat

Other

**Project Location(s) Information:**

County:

Nearest Town:

**Project Phase** *(if applicable):*

of

**Estimated Invoice  
Dates:**

to

**Budget Information:**

**Total WY-WSF Request \$**

Total Project Cost: \$

If yes, list each grant received for five years

Has this project been funded by the Foundation previously?

**Other Project Contributions or Matching Funds:**

In Hand

Requested

Source

Amount \$

**Project Objective and Narrative:**

