Town of Williston
Social Service Organization Funding Request
For the Fiscal Year Ending June 30, 2020

Name of Organization:
Address:
Phone:
Contact:
Email:

Request Amount: _____

1. How many Williston residents (number and percent of total) has your agency served in the past year?

2. How many Chittenden County residents has your agency served in the past year?

3. If the request amount is different from previous years, please describe the reason for the change.

4. Please describe the services your organization offers. How will the funds from the Town of Williston support those services?

5. Please describe the quantitative measures your organization uses to measure success and how your performance over the past year ranks against those measures.

Please send completed form to the Town of Williston, via email, no later than November 2, 2018 to Jennifer Kennelly at *jkennelly@willistonvt.org*. Please direct all questions to Jennifer Kennelly at 802-876-1164.