



Interaction Institute
for Social Change

Grassroots Leadership Development Fund Application

Name _____

Organization Name (if applicable) _____

Address _____

City _____ State _____ Zip _____

Phone _____

Email Address _____

Please answer the following questions in no more than two pages (12 point font):

1. Which workshop are you interested in attending and on which dates (please include multiple dates)?
2. Tell us briefly about the work you do and why you do it.
3. How will your participation in this workshop enhance your ability to serve your community?
4. If you are an individual applying without affiliation with a non-profit organization, please tell us why you need financial support to attend this workshop. If you are an employee of a non-profit organization, what is the annual budget of your organization?

Letter of Recommendation

Please ask someone with whom you have worked and can speak to your candidacy for this workshop to write a brief (no more than one page at 12 point font) letter of recommendation on your behalf, and to mail or e-mail it to the address below.

We should expect to receive a letter of recommendation from:

Name _____

Relationship to you _____

Please mail your application to:

Interaction Institute for Social Change
70 Fargo Street, Suite 908
Boston, MA 02210
Attn: Jen Willsea

Or e-mail your application to:

jwillsea@interactioninstitute.org

*Thank you for your interest in IISC's Grassroots Leadership Development Fund.
We will be in touch in thirty days or less after we receive your complete application.
Please do not fill out the online workshop registration form until you know whether or not you have been selected to receive a workshop fee waiver from this fund.*