



### Organization Information

Organization Name

Website

Mission Statement (word limit: 100)

### Organization Leader Contact

First and Last name

Title

Email address

Phone number

### Request

Program Title

Program Description (word limit: 500)

Evaluation and Measurement (word limit: 250)



First United Community Dreams Foundation Dream Category (Check all that apply)

**Dreams of Education and a Prosperous Future**

- College, career or technical readiness and affordability
- Financial literacy and competency
- K-12 Education and support
- Workforce sustainability

**Dreams of Vibrant and Equitable Neighborhoods**

- Arts and culture
- Entrepreneurship and business expansion
- Small business support and financial guidance
- Technical and digital connectivity

**Dreams of a Healthy Family and Safe, Affordable Housing**

- Family engagement and resiliency
- Housing stability and home ownership

Program Timeframe (word limit: 100)

Program Area Served (Check all counties that apply)

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Alleghany (MD)  | <input type="checkbox"/> Frederick (MD)  | <input type="checkbox"/> Garrett (MD)  |
| <input type="checkbox"/> Washington (MD) | <input type="checkbox"/> Berkeley (WV)   | <input type="checkbox"/> Harrison (WV) |
| <input type="checkbox"/> Mineral (WV)    | <input type="checkbox"/> Monongalia (WV) | <input type="checkbox"/> Preston (WV)  |
| <input type="checkbox"/> Other           |  |  |

Have you previously received grant money from the Dreams Foundation?

**Demographics**

Number of Program Participants/Clients

Does your program address these challenges? (Check all that apply)

- |  |                                  |   |
|--|----------------------------------|---|
| <input type="checkbox"/> Environmental | <input type="checkbox"/> Climate | <input type="checkbox"/> Sustainability |
|--|----------------------------------|---|

Other Diversity, Equity, and Inclusion (DEI) Details (word limit:250)



### Finances

Requested Amount \$

Program Budget \$

Other Funding Sources

### Volunteer Engagement

List any current First United Bank Associate volunteer(s) for your organization:

Are you interested in future volunteer support from First United Bank? If so, what kind?

Other Volunteer Support Details (word count: 100)



### Final Details

Enter your organization's payment mailing address or bank account and routing number:

I certify that I am an authorized signer, and the entity is a 501(c)(3).

(Signature)

The application and supporting documentation should be submitted via:

Mail

**First United Community Dreams Foundation**  
**c/o Denise Phelps**  
**19 S. Second Street**  
**Oakland, MD 21550**

Email

[DPhelps@mybank.com](mailto:DPhelps@mybank.com)

Questions regarding this form or the Dreams Foundation can be directed to:



**Denise Phelps (she/her/hers)**  
T 304-263-3312

19 S. Second Street  
Oakland, MD 21550

[MyBank.com/dreamsfoundation](http://MyBank.com/dreamsfoundation)