

Application: 7335

Test Community Service Submission

Started at: 1/27/2021 12:01 PM - Finalized at: 1/27/2021 01:57 PM

Page: Applicant Information

Project Title

Test Community Service Submission

Amount Requesting

15000

Category

Community Service > Community Service

First Name

Konstandina

Last Name

Dulu

Designation

MA

Are You an FCCP?

No

CHEST ID

335526

Current Place of Employment

CHEST

Current Employment Title

Senior Grants Specialist

Current Volunteer Location

Howard Brown Clinic

Organization or Institution Payment Address

CHEST Global Headquarters
2595 Patriot Boulevard
Glenview Illinois 60026 US

Photo - Professional Headshot

[Last_First_Photo](#)

Page: Instructions Page**Application Instructions**

I have read this information and agree.

Applicant Verification

I verify that the above statements are true.

Page: LOA Agreement

Understanding Letter of Agreement (LOA) Return Requirements

I have read this information and agree.

Understanding Requesting Funds

I have read this information and agree.

Page: Submission Form - Community Service

Applications and all required documents must be submitted prior to the deadline via the GMS for consideration.

Current members of the CHEST Board of Regents or the CHEST Foundation Board of Trustees are not permitted to write letters of support.

Grantees can have no more than one active grant from the CHEST Foundation per year.

Grantees may only receive up to two community service grants from the CHEST Foundation.

Project Focus

Community Health Education/Awareness

Project Location

In the United States

1. Background & Vision

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1. Background & Vision

Continuation of an existing project

Continuation of an Existing Project

Test Community Service Project, Original Title

Continuation of an Existing Project

Yes

Funding Amount

\$10,000, \$5,000

Funding Supporters

City of Chicago, Local donations campaign

1. Background & Vision

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2. Personal Experience Related to the Project (eg, Applicant's Involvement)

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3. Detailed Project Description

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Project Timeline

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See CHEST Foundation [Grant Resources Page](#) for mandatory document attachments. Label all document's so they are clear and distinct.

Ex: last name_first name_document (doe_jane_budget.pdf)

All attachments must be submitted as PDFs.

Program Budget

[Last_First_Budget](#)

Additional Funding

Yes

Additional Funding

5000

Additional Funding

[Last_First_Additional Funding](#)

Current Curriculum Vitae

[Last_First_CV](#)

Letter of Support

[Last_First_LOS](#)

Organization's Mission Statement

[Organization_Mission Statement](#)

Summary of Finances

[Organization_Summary of Finances](#)

Organization's W9

[Organizations_W9](#)