

# Annual Cycle 2024-25

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*The Jefferson Trust*

## *Letter of Inquiry*

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### Applicant/Project Director Unit

#### Other Organization Name

If your organization is not listed in the options above, please list it here. For Students, please indicate the student organization or CIO related to this application.

*Character Limit: 250*

#### Project Name\*

The name of the project is the unique "identifier" for the request.

*Character Limit: 100*

#### What do you want to do?\*

Give us your pitch. Describe your project/program.

*Character Limit: 500*

#### Jefferson Trust Funding Request\*

How much of the total budget are you requesting from the Jefferson Trust?

*Character Limit: 20*

#### Optional Question: How did you learn about the Jefferson Trust?

Please note, this is for informational purposes only and has no impact on your proposal. You may choose more than one option. Thank you for answering!

#### Choices

Online Search

Social Media

Co-worker/Colleague

Professor

On-Grounds Publicity

Media Article (UVA Today, Cav Daily)

Other

**If you selected Other, please use this space to tell us how you heard of the Trust.**

*Character Limit: 200*