

[Your Name]
[Your Title/Position]
[Your Organization]
[Your Organization's Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
[Grant Review Committee Name]
[Granting Agency/Organization Name]
[Agency Address]
[City, State, Zip Code]

Dear [Grant Review Committee Name or Specific Person's Name],
I am writing to express our intention to apply for the [Name of Grant] aimed at [briefly state purpose - e.g., improving community health outcomes, addressing specific health issues, etc.]. At [Your Organization], we are committed to [briefly state your organization's mission related to health].

Our proposed project, titled [Project Title], aims to [brief description of project objectives] in [target population/community]. We believe that this initiative aligns with the goals of [Granting Agency/Organization Name] and will significantly contribute to [specific health outcomes or improvements].

We have identified the following needs within our community:

1. [First need]
2. [Second need]
3. [Third need]

To address these needs, we plan to implement [briefly describe the project activities, methodologies, or interventions]. Our team consists of [mention qualified personnel, partners, or stakeholders], all of whom possess the expertise and commitment necessary to achieve our goals. We are requesting a grant of [specific amount] to support the successful implementation of this project. The funding will be allocated towards [briefly outline budget items, e.g., personnel, supplies, evaluation, etc.].

Thank you for considering our proposal. We are excited about the opportunity to work alongside [Granting Agency/Organization Name] and contribute to [common goal or mission related to health]. We look forward to submitting our full application and further discussing our project.

Sincerely,
[Your Name]
[Your Title/Position]
[Your Organization]