2014 Delta Community Credit Union Philanthropic Fund Application

Form Instructions:

1 – Complete all applicable fields
2 – Save completed form
3 – Email form, any attachments or supplemental paperwork that pertains to your request to Sponsorships@DeltaCommunityCU.com.

SECTION I ORGANIZATION

Organization Name: _____

Organization EIN/Tax Exempt # : _____

Please include the following documents with your completed application:

- **List of Board of Directors**
- **IRS Tax Exempt Letter and/or Articles of Incorporation**
- **Most Recent Audited Financial Statements**
- **Organization's last Bank or Credit Union statement (upon request)**

Organization Type (please check one):

Education ☐ **Arts, Culture, Humanities** ☐ **Human Services** ☐

Environmental Protection ☐ **Health** ☐ **International** ☐

Public Benefit ☐

Street Address: _____

City: _____ **State:** _____ **Zip:** _____

County: _____ **Web Address:** _____

Contact Name: _____ **Title:** _____

Contact Phone # : _____ **Email Address :** _____

Organization Mission Statement (brief description):

_____

_____

_____

_____

Section II PROJECT/PROGRAM

Project/Program Description:

_____

_____

_____

_____

Length of Project/Program: _____

Geographic Area(s) Served: _____

Age Group(s): **0-5** ☐ **6-10** ☐ **11-15** ☐ **16-21** ☐ **22+** ☐

Gender: **Female** ☐ **Male** ☐ **Both** ☐

PROJECT/PROGRAM BUDGET

Requested Grant Amount: **$** _____

Requested Payment Date: _____

Month **Year**

Total Project/Program Budget (including amount requested from Delta Community Credit Union): **$** _____

Alternative Funding Sources: List all other planned sources of funding for this project/program.

_____

_____

_____

_____

PROJECT/PROGRAM OBJECTIVES AND OUTCOMES

List three (3) Project/Program goals and how they will be evaluated:

1. _____

_____

2. _____

_____

3. _____

_____

Describe how Delta Community Credit Union grant support will help meet Project/Program goals:

_____

_____

_____

_____

If this is an on-going program, how have recent grant awards from other grant providers helped your organization meet prior goals?

_____

_____

_____

_____

SECTION III VOLUNTEERISM

DELTA COMMUNITY CREDIT UNION EMPLOYEE INVOLVEMENT

Are there any Delta Community employees who currently serve on the board or volunteer with your organization? If so, please provide names.

_____

_____

Are there opportunities for Delta Community employees to volunteer with:

- ☐ **this project/program?**
- ☐ **your organization?**

SECTION IV COMMITMENTS

☐ Agree

I pledge that my organization's use of any donation from Delta Community Credit Union will not be used to discriminate against those it serves based on race, color, religion, gender, national origin, disability, marital status, veteran status, sexual orientation or other basis prohibited by law.

Signature (Type Name): _____

Date: _____

☐ Agree

I understand that if awarded a 2014 Delta Community Credit Union Grant, it must be used for the sole purpose(s) indicated in this application.

Signature (Type Name): _____

Date: _____

Requests for Delta Community Credit Union assets (logo, advertisements, etc.) should be emailed to Sponsorships@DeltaCommunityCU.com once grant has been approved. Please provide specifications including size, file format, etc. The request must be received at least two weeks prior to deadline.