

APPLICATION FORM

COW CREEK UMPQUA INDIAN FOUNDATION

2371 N.E. Stephens Street, Suite 100

Roseburg, Oregon 97470

541-957-8945

Before filling out this application form, it is very important for you to read the Grant Guidelines to be sure your proposal qualifies for consideration. In order to receive consideration by the Foundation's Board of Directors, applications must be postmarked by the deadline. Application deadlines are March 1 and September 1 of each year.

Please type the answer to each question concisely within the space indicated. Do not extend your responses to extra sheets of paper. An application form submitted with answers expanded beyond the space indicated will not be considered.

Submit 1 original and 2 copies of the completed application form. Attach a 1 copy of a brief cover letter and 1 copy of the material requested for attachments.

The application form is designed to be filled-out on your computer, printed-out on your printer, then mailed to the Foundation. Press the Tab key to advance from field to field, or just mouse-click in a text field.

Date _____

ORGANIZATION NAME _____ FOUNDING DATE _____

ADDRESS _____
Street City State Zip

CONTACT PERSON: _____
Name Title Work Phone

Signature of Board President

Signature of Director

Type Name Phone

Type Name Phone

PROPOSAL INFORMATION

1. Description of organization and its purpose:

2. Number of paid employees _____ Number of volunteers _____

3. Description of project for which funds are requested:

4. Specifically, how will the grant funds be used?

5. How was the need for the project determined and how will the project respond to this need?

6. What are the project's specific objectives? (What will the project accomplish?)

7. What are your organization's special qualifications to address these objectives?

8. How does this project fit into the long range plans of the organization?

9. List other groups addressing similar objectives **and** the extent of your coordination with each:

10. Project period: _____ Beginning _____

11. Geographic area to be served by project: _____

12. Client group and numbers to be served by project: _____

13. Current annual budget: _____ Amount budgeted for administration _____

14. Total financial support received **last fiscal year** \$ _____

Sources of this support

Memberships and individual contributions \$ _____ Fundraising activities \$ _____

Government programs \$ _____ Foundations \$ _____ United Way \$ _____

Other (identify) \$ _____

15. Estimate the costs you incurred in fundraising (salaries, brochures, mailings, professional services, grantwriting)
\$ _____

16. Total proposal budget \$ _____ Amount requested from CCUIF \$ _____

17. Indicate with a check mark whether request is for:

Special project _____ Capital Expenditure _____ Operating Support _____

18. List other sources of support being applied for (sources and amount): 19. List previous grants from CCUIF (contract period, amount, purpose):

20. Secured commitments/pledges:

21. If project is successful, how will it be funded in the future?

Attach single copies of the following to the original only:

_____ Financial statement from last completed fiscal year

_____ Current detailed agency budget

_____ One Page Detailed Project Budget

_____ List of officers and Board Members with their affiliations and phone numbers

_____ Copy of 501(C) and 509(a) tax exemption letter from the Internal Revenue Service

_____ Descriptive brochure if available

2 copies of application form in addition to the original, with the following attached:

_____ One page Detailed Project Budget