

APPENDIX C: APPLICATION COVER PAGE

Legal Organization Name:

Address:

Phone:

Established In:

Website:

Executive Director:

Email/Phone:

Project Manager (if different):

Email/Phone:

Organizational/Agency Overview Statement:

Mission Statement:

Summary of Major Project(s) and Budget:

With my signature, I certify the following:

1. The above information is correct;
2. I am authorized by the governing board of the applicant organization to submit this grant application;
3. The organization is in good standing with the Internal Revenue Service (IRS), retains its 501 (c)(3) tax exempt status, and is further classified as a public charity and not a private foundation, or is a public agency;
4. The organization does not discriminate on the basis of religion, sexual preference, sexual orientation, physical circumstances, or national origin;
5. The organization agrees to submit quarterly progress reports and final progress reports;
6. The organization agrees to submit proof of insurance at the levels required by the county, as well as the documents required in this application.

Signing Authority Name (printed)

Title

Signature

Date