

TPC Letter of Intent Application 2017-18

Organization Information

1. Organization Name *

2. Contact Information

Street Address *

Apt/Suite/Office

City *

Eligible Zip Codes *

01451
01460
01503
01581
01701
01702
01703
01704
01705
01718
01719
01720
01721
01730
01731
01740
01741
01742
01745

If you are a national organization, do you have a chapter (with its own 501c3 status) within these zip codes?

Yes

No

Website URL *

Executive Director Name *

Executive Director Email *

Contact Name *

Contact Email Address *

Contact Phone Number *

3. Does your organization have a Fiscal Sponsor? *

Yes

No

4. Annual Revenue (as reported on the most recent IRS Form 990 or in Fiscal Sponsor letter) *

5. Indicate which disparities are addressed in your organization's mission (check all that apply) *

- Poverty
- Income
- Employment
- Education
- Health and wellness
- Gender, ethnic, and/or racial bias

6. Indicate category(s) for which you are requesting funding (check all that apply) *

- Operations and general support
 - Expansion of existing program
 - Tangible goods to advance a program (e.g. van, cameras, computers)
 - New program
 - Organizational infrastructure (e.g. program evaluation, organizational development, planning, marketing and communications, Board development)
-

7. Describe your organization's mission and goals, including a description of the needs of the population served, and how your specific programs address those needs (limit 450 words). *

8. Describe how your organization would use The Philanthropy Connection's grant (limit 450 words). *

9. Describe how you will determine if TPC funds have made a difference in your organization and/or the individuals receiving services (limit 150 words). *

10. Describe how the experience and background of your Executive Director and other key staff are relevant to and benefit your organization's mission (limit 250 words). *

Fiscal Sponsor Information

11. Fiscal Sponsor Organization Name

12. Date Sponsorship Began



13. What is the organizational relationship (e.g., structural and/or governance ties, benefits and privileges, changes in the relationship over time, legal and fiduciary responsibility, etc.)

14. Do you receive financial support from this organization?

- Yes
- No

15. If you answered yes above, please disclose the amount of support from the last completed fiscal year.

Diversity Data Form

16. Asian

	No. of Female	No. of Male
Board	<input type="text"/>	<input type="text"/>
Executive Director	<input type="text"/>	<input type="text"/>
Other Management or Supervisory Staff	<input type="text"/>	<input type="text"/>
Other Staff	<input type="text"/>	<input type="text"/>
Population Served	<input type="text"/>	<input type="text"/>

17. Black

	No. of Female	No. of Male
Board	<input type="text"/>	<input type="text"/>
Executive Director	<input type="text"/>	<input type="text"/>
Other Management or Supervisory Staff	<input type="text"/>	<input type="text"/>
Other Staff	<input type="text"/>	<input type="text"/>
Population Served	<input type="text"/>	<input type="text"/>

18. Latino(a)

	No. of Female	No. of Male
Board	<input type="text"/>	<input type="text"/>
Executive Director	<input type="text"/>	<input type="text"/>
Other Management or Supervisory Staff	<input type="text"/>	<input type="text"/>
Other Staff	<input type="text"/>	<input type="text"/>
Population Served	<input type="text"/>	<input type="text"/>

19. White

	No. of Female	No. of Male
Board	<input type="text"/>	<input type="text"/>
Executive Director	<input type="text"/>	<input type="text"/>
Other Management or Supervisory Staff	<input type="text"/>	<input type="text"/>
Other Staff	<input type="text"/>	<input type="text"/>
Population Served	<input type="text"/>	<input type="text"/>

20. Other

	No. of Female	No. of Male
Board	<input type="text"/>	<input type="text"/>
Executive Director	<input type="text"/>	<input type="text"/>
Other Management or Supervisory Staff	<input type="text"/>	<input type="text"/>
Other Staff	<input type="text"/>	<input type="text"/>
Population Served	<input type="text"/>	<input type="text"/>

21. Additional comments

Required Documents to Include in Application

22. 501(c)(3) Status Letter **OR** Fiscal Sponsor Agreement Letter *

Browse...

23. First page of the most recent IRS Form 990 **OR** letter from the Fiscal Sponsor certifying applicant's revenue, including only that which would be reported on the Total Revenue line of IRS Form 990. *

Browse...

24. Resume(s) of Executive Director and other key staff *

Browse...