

**Humboldt Sponsors, Inc.**  
**2018 GRANT APPLICATION**

<b>Humboldt Sponsors Use Only</b>	<b>2018</b>
Grant Amount	_____
Application Complete	_____
Report Accepted	_____
Amount Requested	_____

**Incomplete applications will not be considered.**

The primary purpose of Humboldt Sponsors is to raise funds to distribute to Humboldt County youth. **All recipients must provide proof of tax-exempt status or proof of eligibility through a tax-exempt entity.**

**Please enclose** the original application and ten (10) **copies** of all materials. This includes signed application, detailed narrative, budget, and any additional information by the deadline of **Friday, February 9, 2018.**

**Mail to:** **Nancy C Mathews**  
**Humboldt Sponsors**  
**1171 Marsh Road**  
**Eureka, CA 95501**

*Please complete the application by writing or typing in the box beside each question.*

<b>1. Organization Information</b>											
Name of organization:											
Address: Contact person: Phone: Email:											
Does your organization have a tax-exemption?  (Humboldt Sponsors requires proof of tax-exempt status or proof of eligibility through a tax-exempt entity.)	<table border="1"> <tr> <td>No</td> <td></td> </tr> <tr> <td>Yes</td> <td></td> </tr> <tr> <td>Tax I.D. Number</td> <td></td> </tr> </table>	No		Yes		Tax I.D. Number					
No											
Yes											
Tax I.D. Number											
Name of agency/ organization holding tax-exemption (if other than the applicant, include letter of authorization):											
Grant Amount Requested	\$										
How will the funds be used (please be specific)?											
How many children will benefit from these funds?											
Location of camp/activity:											
Date of camp/activity:											
Has this camp/activity been previously funded by Humboldt Sponsors?	<table border="1"> <tr> <td>No</td> <td></td> </tr> <tr> <td>Yes</td> <td></td> </tr> <tr> <td>What year?</td> <td></td> </tr> <tr> <td>How much?</td> <td>\$</td> </tr> </table>	No		Yes		What year?		How much?	\$		
No											
Yes											
What year?											
How much?	\$										
Is your organization presently receiving funds from any other source (United Way; service groups; or local, state or federal funds or private donations)? List all sources and amounts. If you are handwriting the application and require more space, please attach an additional page.	<table border="1"> <tr> <td>No</td> <td></td> </tr> <tr> <td>Yes</td> <td></td> </tr> <tr> <td>From whom?</td> <td></td> </tr> <tr> <td>For what?</td> <td></td> </tr> <tr> <td>How much?</td> <td>\$</td> </tr> </table>	No		Yes		From whom?		For what?		How much?	\$
No											
Yes											
From whom?											
For what?											
How much?	\$										
Board of Directors (person or persons in charge):	1. Name Address Phone										
	2. Name Address Phone										
	3. Name Address Phone										

**2. Detailed Narrative**

Please provide a detailed narrative about the program. Make sure you include program objectives and a description of the program.

If you are handwriting the application and require more space, please attach an additional page.

**3. Detailed Budget**

Please submit a detailed budget for the program.

If you are handwriting the application and require more space, please attach an additional page.

**4. In what form will Humboldt Sponsors receive recognition for this contribution?**

Local Newspaper

Verbal Announcement

Banner - Sign

Brochure Ad

Other (Explain)

**5. How are Volunteers used in this project?**

When you have completed this form, please return the original application and ten (10) **copies** of all materials by **Wednesday, February 9, 2018**. This includes signed application, detailed narrative, budget, and other additional information.

**Application Checklist**

<input type="checkbox"/>	I have completed the application
<input type="checkbox"/>	I have signed the original application
<input type="checkbox"/>	I have included additional information for the application (optional)
<input type="checkbox"/>	I have included ten copies of the application and additional information
<input type="checkbox"/>	

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

