

THE CHATLOS FOUNDATION APPLICATION FOR FUNDING

Use your tab key to move from space to space. Each of the form fields will expand to hold your content. Then print the document to send with your application packet. Do not send the document electronically.

Today's Date:				
Organization:				
Street Address:	Address	City	State	Zip
Mailing Address: <i>*If different from Street Address</i>	Address	City	State	Zip
Phone Number:	Fax:			
Organization Email:	Web Address:			
Primary Contact:	Mr./Ms./etc.	First Name	Last Name	
	Title	Contact's Email Address:		
Executive Director:	Mr./Ms./etc.	First Name	Last Name	
	Contact's Email Address:			
Current Board Chair: (Must be other than contact person)				
Must include alternate address for Board Chair:	Address	City	State	Zip
Tax exempt name if different from above: (Required) Attach copy of US/IRS Tax Exemption Letter	Date of Original Exemption:			
Federal ID #:				
Briefly state your organization's mission:				

Funding Request Information

Amount, title and description of request to this foundation:	\$	Project Title:	Project Description: (Brief Description)
Budget of program related to this request:	\$	Time Frame (if any):	
Program Director:			
List to date any funding commitments to requested project:			
Does your organization use outside professional fund raisers / grant writers?	<input type="checkbox"/> NO <input type="checkbox"/> YES		If yes, are they compensated? <input type="checkbox"/> NO <input type="checkbox"/> YES
	If yes, please explain and provide name and address.		
	Address	City	State Zip
Other foundations that have funded your organization (List only 2)			
Name of Organization (1):			
Address:	Address	City	State Zip
Phone Number:			
Name of Organization (2):			
Address:	Address	City	State Zip
Phone Number:			
Other			
Does your organization submit an IRS form 990?	<input type="checkbox"/> NO <input type="checkbox"/> YES		
Does your organization receive government funding?	<input type="checkbox"/> NO <input type="checkbox"/> YES (please check)		<input type="checkbox"/> State <input type="checkbox"/> County <input type="checkbox"/> Federal
Does your organization attempt to influence legislation and/or candidacy of persons for elected office?	<input type="checkbox"/> NO <input type="checkbox"/> YES		Explain:

ALL Fields Must be Completed.

**Proposal Packet must contain:
PLEASE DO NOT STAPLE OR BIND THE PACKET ITEMS**

Mail the items listed to the right to:

Attn.: Grants Administrator
The Chatlos Foundation, Inc.
P.O. Box 915048
Longwood, FL 32791-5048

- A Cover Letter which includes the project description and specific amount requested.
- The proposal not to exceed 5 pages.
- The most recent organizational budget as approved by Board of Directors.
- Copy of IRS Tax Exempt Letter.
- Completed Chatlos Foundation application.

Once you have completed the form, you can SAVE or PRINT the document.

To Save:

Select **File** at the top of this Window and then select **Save As**. Name the document and save it on your computer.

To Print:

Select **File** and **Print**. Once you close the window you will not be able to return to this application unless you save it.