



Shee Atiká

Grant Application

Legal name of organization

Address of organization

City	State	Zip Code
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Fax number	Web-site address
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Date of incorporation	Federal Tax ID #
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Organizational status	<input type="checkbox"/> IRS 501(c)(3)	<input type="checkbox"/> Other (explain)
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Authorized Official	Title
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Telephone number	email address
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Contact for this application	Contact title
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Contact telephone number	Contact email address
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Project budget \$	Amount requested \$
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Short Description of Grant Purpose

Signature of authorized official	Date
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Typed or Printed Name	Title
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Please be sure to provide the additional information specified on page 2 of this application. Incomplete applications will not be considered. Applications must be turned in at least three weeks prior to the date when funds are required. Applications for over \$1,000 will be considered by the Shee Atiká, Incorporated Board of Directors quarterly.

Shee Atiká, Incorporated
Grant Application

In addition to the information provided on the first page, please provide the following:

- A more detailed description of the project, including total project budget (in as much detail as available), timeline for implementation and beneficiaries served.
- Identify other sources of funding and amounts for each (actual to date and projected).
- Mission statement for the organization.
- IRS 501 (c) (3) tax exemption letter.
- Most recent balance sheet and statement of revenues and expenses.
- List of directors and officers of the organization.
- Representative list of donors.