

2023 COG Charity Grant Application Form

Complete this application and submit to:
Children's Opportunity Group

grantrequest@childrensoportunitygroup.org

Application submissions must be submitted by April 15th, 2023
use attachments as needed, to provide additional information and supporting documentation

1. Organizational Information

1a. Organization Name _____

Address _____

Website URL _____

1b. Employer Identification Number (EIN) _____ *also provide a copy of your
organization's IRS 1023 form and IRS 501(c)(3) affirmation letter

1c. Staff Members - # Paid full time _____ # Paid part time _____ # Volunteer _____

1d. Affiliated with a National/Regional Organization? YES ___ NO ___

If yes, provide name, address, and website URL _____

2. Organizational Purposes

2a. Organization Vision and Mission - Provide a copy of Vision and Mission Statements

2b. Services - Provide brief explanation (limit two sentences each) of top three services
provided

2c. Population Profile - Provide a brief description (limit one paragraph) of those directly
benefiting from services

3. Financial Information

3a. Annual Report - Provide copy of organizations most recent annual report and financial statements

3b. Current Budget - provide copy of organizational budget for current year

3c. Funding Sources - provide (list Source name and amount) of top three primary sources of funding

4. Request Information

4a. Request Summary - Provide brief summary (limit one paragraph) for which this Grant application is requesting funds

4b. Alternative Funding - Briefly indicate known alternative sources of funding on this request

5. Point of Contact

Point of Contact (POC) - Provide contact information for the individual within your organization who will serve as the principal POC for the management and processing of this grant

1. Name _____

2. Title/ Position _____

3. Phone Number _____

4. Email Address _____

5. Mailing Address _____

6. **Organizational Signature** _____

Chief Executive Officer (or equivalent) - Provide contact information for the individual within your organization, whose signature confirmed the accuracy of all information contained in this Grant application

1. Name _____

2. Title/ Position _____

3. Phone Number _____

4. Email Address _____

5. Mailing Address _____

Signature _____

Date _____

Printed Name _____

Title/ Position _____