

**2020 APPLICATION FOR** **FUNDING**

**Checklist**

The deadline for submission of this application is **12:00 noon on November 15th, 2019**.

**Eligibility:**

|  |  |
| --- | --- |
| **Yes/No** | **Requirement** |
|  | Are you a valid 501(c)3 organization or local school district program? |
|  | Do you serve individuals in Marion, Nelson and/or Washington Counties? |
|  | Are you a health and human service organization providing service in at least one of the following United Way priority areas: Education, Financial Stability or Health? |

**Required Information to be submitted:**

|  |  |
| --- | --- |
| **Submitted** | **Requirement** |
|  | Two (2) hard copies of your full application |
|  | Emailed a full application packet to director@tricountykyuw.org |
|  | Program budgets for the program for which you are seeking funding (please use attached forms). |
|  | Signed copy of Agency Agreement (please use attached form). |
|  | Anti-terrorism Compliance (please use attached form). |
|  | Most recent agency Financial Statement/Audit/990 (as applicable). |
|  | IRS letter confirming your exempt status under the 501(c)3 status or as a school. |
|  | Current Board roster with designation of officers and affiliations. |
|  | A copy of your Non-Discrimination Policy. |
|  | A success story from program for which you are seeking funding. Please do not use real names. |
|  | Program/Agency brochure. |
|  | Most recent annual report and/or newsletter, if applicable. |
|  | Copy of your registration with Kentucky Secretary of State (available through <https://app.sos.ky.gov/ftsearch/>). |
|  | Optional: Please provide a **picture of your requested program’s services** that can be used for marketing materials (social media, brochure, etc.). |

***Thank you!***