

# LA UNIDAD LATINA FOUNDATION

## 2009 GRANT APPLICATION FORM

## MISSION STATEMENT

LA UNIDAD LATINA FOUNDATION, established in 2000, exists to:

- Award scholarship grants to worthy and needy students for the pursuit of higher education.
- Support and encourage participation in educational programs and activities.
- Support community programs which aid in the civic empowerment and educational improvement of the Latino community.

Grants are available on a competitive basis to Latino-serving organizations for support of educational and community programs and activities. **Priority funding is given to student-run and student-serving organizations.**

Applications are reviewed at quarterly meetings (March, June, August, November) of the Board of La Unidad Latina Foundation.

La Unidad Latina Foundation is unequivocally committed to equal opportunity. Therefore, La Unidad Latina Foundation does not discriminate against applicants on the basis of gender, race, national origin, disability, age, color, creed, or sexual orientation.

# GRANT APPLICATION

## PART I

*Please Provide the following Information-- Applicants must print clearly or type all answers on a separate sheet of paper.*

A. Organizational Name: \_\_\_\_\_

B. Executive Director/  
President: \_\_\_\_\_

C. Address  
& Telephone: \_\_\_\_\_

( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_

D. E-mail Address  
& Organizational  
URL Site: \_\_\_\_\_

E. The Organization is: (1) Tax-Exempt  Under Internal Revenue  
Code: 501(c) \_\_\_\_

Please provide copy of IRS tax-exempt determination letter.

(2) Officially Recognized Student Organization

\_\_\_\_\_  
Name of College/University

\_\_\_\_\_  
College/University Administration Contact & Phone Number

(3) Other  Please Explain:

F. Has the organization been incorporated? Yes  No

If yes, when? \_\_\_\_

Please provide documentation of incorporation.

G. Number of Staff/Members: \_\_\_\_\_ Number of Board: \_\_\_\_\_

Please provide Board/Officers List with Positions and Affiliations.

H. Organization's  
Mission  
Statement: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I. Geographic Area Served: \_\_\_\_\_

J. Organizational Annual Budget: \_\_\_\_\_  
Please provide detailed budget including expenses and projected revenues.

**PART II**

A. Funding Request Amount: \_\_\_\_\_

B. Proposal for Funding: \_\_\_\_\_  
(35 words or less)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Please answer the following with as much detail as possible. Please present your answers on a separate sheet.*

- C. Please describe your organization's programs and services directed towards the civic empowerment and/or educational improvement of Latinos.
- D. Please describe the program for which you are requesting funding, with identifiable objectives and outcomes. Please explain how this program will impact the Latino community.
- E. If this is an existing program, please describe the program's accomplishments in the past year. Provide a program budget.

Please send application and materials to:

La Unidad Latina Foundation  
51-36 30th Avenue, Suite 5H  
Woodside, NY 11377

## CERTIFICATION

I certify that all the information provided in the application submitted to La Unidad Latina Foundation for funding consideration is complete and accurate to the best of my knowledge (You must certify to ensure consideration of application).

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Signature

Date