



# Application for Funding

**The TMPAA Charities Board of Directors will accept funding applications from all Target Markets Members if the funding requests address the two target areas of Education or Business Development.**

## TMPAA MEMBER SUBMITTING APPLICATION

Name \_\_\_\_\_

Agency/Company \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Date \_\_\_\_\_ Amount Requested (up to \$5,000): \$ \_\_\_\_\_

## TENTATIVE RECIPIENT INFORMATION

Organization Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_ Website \_\_\_\_\_

Organization's Internal Revenue Service 501(c)3 tax identification number \_\_\_\_\_

CEO or Executive Director \_\_\_\_\_

Primary Contact \_\_\_\_\_

Address (if different than above) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Geographic area served \_\_\_\_\_

## ORGANIZATION DESCRIPTION *Please provide the following:*

1. Mission: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. History: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Current programs and services: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Population served: \_\_\_\_\_  
\_\_\_\_\_

**Tentative Recipient Information, Continued ...**

**FUNDING REQUEST**

1. Describe program or service, its goals and objectives, proposed activities, target population or audience, budget and timetable: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Explain why it is important to achieve the effort's expected outcome and/or its direct benefit to the target population: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Relevance to TMPAA mission: \_\_\_\_\_  
\_\_\_\_\_

4. Show how the program's success will be defined and measured: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. If grant is awarded, show how program or service will be sustained without future TMPAA grants:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FINANCIAL INFORMATION—Please provide these supporting documents with the application.**

- Most recent annual report
- Current operating budget
- Most recent IRS Form 990
- Most recently audited financial statements
- List of Current directors
- Copy of IRS 501(c)3 letter

*To certify the contents of this application, the organization's CEO or Executive Director or designate should sign below:*

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

**HOW TO SUBMIT REQUEST**

*Print, mail, fax or email to:* **Ray Scotto**, TMPAA Executive Director  
3411 Silverside Rd., Baynard Building, Ste. 100, Wilmington, DE 19810  
Phone:(302) 268-1010 Fax: (877) 892-4437  
Email: Ray.scotto@targetmkt.com

**All funding requests will be reviewed and voted on by the TMPAA Charities Board.**