

Contribution Request Application

Date: _____ Organization: _____

Contact person and title: _____

Mailing address: _____

Phone: _____ Fax: _____ Email: _____

Tax exempt #: _____ Website: _____

I.

Brief description of organization, including main programs and target population:

Actual number of people served in the last year, through your programs: _____

Demographics of people served, by race and gender: _____

Types of service provided: _____

Date organization founded: _____

II.

Description of specific project/program or event for which you are requesting

support: _____

Goals of project/program: _____

Target population of the project/program: _____

Annual project/program or event? Yes ___ No ___ Date initiated: _____
New project/program or event? Yes ___ No ___

Project/program implementation date: _____
Completion date: _____

How will success or progress of the project/program be
measured? _____

Total project/program or event cost: _____

Dollar amount of money that will benefit project/program after costs: _____

Other sources of funding requested/expected for this project: _____

III.

Specific support you are requesting from the American-Statesman: _____

What sponsorship recognition opportunities are available for this project/program or event?

Has the American-Statesman participated in this project/ program or event before? Yes ___ No ___

If "Yes", when and what specific support was given? _____

Are any Austin American-Statesman employees involved in your organization? Yes ___ No ___

If "Yes", who and in what capacity? _____