



**Monarch Community Outreach
Application for Assistance - Organization**

Name of Organization _____ **Date** _____

Address

Phone # _____ **Best Time to Call** _____

Contact Person _____ **Title** _____

Website _____

Email _____

Do you have certification as a non-profit under Section 501©3 (IRS)? Yes No

Please describe the mission and/or purpose of your organization

For what purpose do you intend to use the funds provided by MCO?

Who (or what communities) are the primary beneficiaries of your mission?

To what other organizations are you applying for funds?

Please provide a copy of all of the following:

- Your mission statement**
- List of your Board of Directors**
- Copy of 501©3 status from IRS**
- Any brochure or other printed materials describing your organization**
- Your latest financial statements**

