****

**2017 Community Grants – Nomination Form**

Complete and email to lilliane@latinocommunityfund.org, or fill it out online at <http://www.latinocommunityfund.org/2017_community_grant_awards>. Due: **Friday, May 19th, 2017**.

|  |
| --- |
| Organization information |
| Organization Name: |  |
| Mission: |  |
| Address: | Street address: |  |
| City |  | State |   | Zip |  |
| Contact person at organization: | Name: |  | Title: |  |
| Contact information: | Phone |  | Email: |  |
| Total revenues for most recent complete fiscal year: |  |
| Nonprofit Status: |  ⃣ 501(c)3EIN#:  | ⃣ Fiscally Sponsored by another 501(c)3 Name: EIN #:  |
| Organization Size:  | Total # staff:  | Total # volunteers:  |
|

|  |  |
| --- | --- |
| Eligibility | Yes or No |
| Is more than 50% of the programs’ or organizations’ governance board Latino/a? |  |
| Is the Executive Director (or equivalent) of the program or organization Latino/a? |  |
| Is the program or organization’s work directly aimed at improving the lives of Latinos? |  |

 |
| Nominator Information |
| Name: |  |
| Relationship with requesting organization: | ⃣ Board member⃣ Volunteer |  ⃣ Program participant/beneficiary ⃣ Other: |
| Contact information: | Phone: |  | Email: |  |
|  |
| Request information |
| 1. What is the main work of the organization or program?
 |  |
| 1. How is this work important to the Latino/a community?
 |  |
| 1. How does the work of this organization advance **leadership** in the Latino/a community?
 |  |
| 1. How will additional funds advance the overall work and/or capacity of this organization or program?
 |  |
| 1. Amount $ Requested:
 |  |

**Contact Us!** We welcome your questions about this call for nominations.

Lilliane Ballesteros: lilliane@latinocommunityfund.org / 661-717-2761

Peter Bloch-García: peter.blochgarcia@latinocommunityfund.org /206-354-1487

Vicky Breckwich Vásquez: vickysalud@gmail.com /206-482-3469

José Vásquez: jose.vasquez@latinocommunityfund.org /206-930-0668