



**CCCU COMMUNITY INVESTMENT PROGRAM
APPLICATION**

Date of Application: _____ Amount Requested: \$ _____

PROJECT INFORMATION

Program/Project Name: _____ Total Project Cost: \$ _____

This grant would provide the following for the project (*please be brief and clear*):

Number of individuals who would directly benefit from this grant: _____

Number of individuals served on an ongoing basis: _____

Organization Name: _____ County: _____

Contact Person: _____ Title: _____

Primary Phone: _____ Email: _____

LEGAL APPLICANT INFORMATION

Legal Name of Tax Exempt Organization: _____

Mailing Address: _____ City _____ State _____ Zip _____

Executive Officer: _____ Title: _____

Primary Phone: _____ Tax ID #: _____

Email: _____ Website: _____

CHECKLIST

Please submit the following with your application:

- ☐ Project Narrative (one page maximum)
- ☐ Program Budget – (see attached)
- ☐ Letter of Tax Exemption (e.g. 501(c) 3 letter)



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TOTAL PROJECT BUDGET

Anticipated budget for the **Project** (include how grant funds will be spent).

Expense	Amount requested from Coast Central Credit Union	In-kind donations	Other funding sources		Total Budget
			Amount	Source	

EXAMPLE:

Expense	Amount requested from CCCU	In-kind Donations	Other funding sources		Total Budget (add all columns)
			Amount	Source	
Building Materials	\$3,500	\$1,500	\$6,000	Contractor	\$11,000
Project Labor	0	0	0	5 Volunteers	0
Travel	\$1,500	0	0		\$1,500
Food	0	0	\$2,000	Foundation	\$2,000
TOTALS:	\$5,000	\$1,500	\$8,000		\$14,500