

2018 Cal EITC Free Tax Preparation Assistance Grant Application Cover Sheet

Note: The cover sheet is not scored but is a required element of the application.

APPLICANT INFORMATION	
APPLICANT NAME:	
FUNDING AMOUNT REQUESTED:	\$
TARGET AREA:	
TYPE OF TAX EXEMPT ENTITY:	
<input type="checkbox"/> PRIVATE NON-PROFIT <input type="checkbox"/> LOCAL PUBLIC ENTITY (STATE AGENCIES INELIGIBLE) <input type="checkbox"/> FEDERALLY RECOGNIZED INDIAN TRIBAL GOVERNMENT	
TAX PAYER ID #:	
PHYSICAL MAILING ADDRESS:	
NAME OF EXECUTIVE DIRECTOR / CHIEF EXECUTIVE OFFICER:	
PHONE NUMBER:	
EMAIL ADDRESS:	
POINT OF CONTACT (PPC) NAME:	
POC PHONE NUMBER:	
POC EMAIL ADDRESS:	
APPLICANT CERTIFICATION	
I certify by my signature below that my organization possesses ALL the following:	
A. Knowledge of the state and federal Earned Income Tax Credit (EITC) and Volunteer Income Tax Assistance (VITA) program;	
B. Three years of experience successfully providing, coordinating, and implementing free tax preparation assistance activities that serve low-income populations;	
C. The ability to collect and report reliable and valid data for all proposed activities; and	
D. Entity is in good standing with federal and state administering grant issuing agencies.	
AUTHORIZED INDIVIDUAL'S NAME, TITLE, and SIGNATURE	PRINTED NAME: _____ TITLE: _____ ORIGINAL SIGNATURE: _____ DATE: _____