

2021 CalEITC+ 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:	\$
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	
TAXPAYER ID #:	
MAILING ADDRESS:	
NAME OF EXECUTIVE DIRECTOR / CHIEF EXECUTIVE OFFICER:	
PHONE NUMBER:	
EMAIL ADDRESS:	
POINT OF CONTACT (POC) NAME: (for daily grant management)	
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 free tax preparation assistance programs;
- B. Three (3) years of experience successfully providing, coordinating, and implementing education and outreach activities that serve low-income populations;
- C. The ability to provide education and outreach activities appropriate to the language and culture of the targeted population;
- D. The ability to collect and report reliable and valid data for all proposed activities; and
- E. Entity is in good standing with federal and state administering grant issuing agencies.

AUTHORIZED INDIVIDUAL'S NAME, TITLE, & SIGNATURE	NAME: _____ TITLE: _____ WRITTEN SIGNATURE: _____ DATE: _____
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