



SAN DIEGO CHINESE WOMEN'S ASSOCIATION

REQUEST FOR FUNDING APPLICATION: DUE MARCH 31, 2018

Organization:		
Contact Person:		
Mailing Address:		
City:	State:	Zip:
Email:	Phone:	
Amount Requested:	501 (C) 3 Yes _____ No _____	Federal Tax ID #

1. Describe the program or project for which you are requesting funding:

2. Organization's Mission Statement:

3. List programs you provide the community:

4. Please include a copy of your organization's latest annual report or Statement of Financial Activities.
Please list % Government Grants _____ List % of Corporate Contributions _____
Please list % Individual Contributions _____ List % of Other _____
Estimate Operating expenses for latest fiscal year _____

5. Have you previously received funding from the San Diego Chinese Women's Association?

When _____	For What Project _____	Amount Received \$ _____
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Submitted by (name) _____	Date: _____
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You may use one additional page to address questions #1-3. Please submit completed application as an email attachment to: sherilynjang@hotmail.com OR submit a completed typed application postmarked by March 31, 2018 to:

SDCWA Philanthropies Committee
P.O Box 881882
San Diego, CA 92168-1882