



CHARITABLE GIVING GRANT APPLICATION

Charitable nonprofit organizations are asked to submit their online application between September 1st – December 1st for the current calendar year. Chef Works is unable to grant every request.

Date of Application:

CONTACT INFORMATION

First name:	<input type="text"/>	Last name:	<input type="text"/>
Address:	<input type="text" value="Street Address"/>	Title:	<input type="text"/>
	<input type="text" value="City"/> <input type="text" value="State"/> <input type="text" value="Zip"/>	Telephone:	<input type="text"/>
	<input type="text" value="Province/Country"/>	Email:	<input type="text"/>

ORGANIZATION INFORMATION

Legal name:	<input type="text"/>	AKA name:	<input type="text"/>
Are you applying on behalf of another organization?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please complete ("In Care Of")		
"In Care Of" Agent Name:	<input type="text"/>		
Relationship of "In Care Of" to Organization. (i.e. Consultant)	<input type="text"/>		
Organization mailing address:	<input type="text" value="Street Address"/> <input type="text" value="City"/> <input type="text" value="State"/> <input type="text" value="Zip"/> <input type="text" value="Province/Country"/>	Telephone:	<input type="text"/>
		Website:	<input type="text"/>
		Email:	<input type="text"/>
EIN/Tax ID Number:	<input type="text"/>	Population served:	<input type="text"/>

Please provide the Organization's Mission and/or Vision.

List other corporate and foundation contributors.

Names, if any, of Chef Works employees connected to your organization and their role. (i.e. volunteer, board member, committee)

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GRANT PROPOSAL INFORMATION

PLEASE NOTE: Chef Works will not provide funding toward operational costs.

Project or program title:

Event start:

Event date:

Has your organization received funds from Chef Works in the past? Yes No

Request amount? Range \$5,000 to \$25,000 USD

Project/Program total budget?

Does your organization have at least one separate financial or accounting person or function? Yes No

Project or program focus. Our strategic philanthropy focuses on three areas: **1.** the elimination of children living in poverty, **2.** children and adults living with intellectual and developmental disabilities and **3.** protecting and improving the environment. **Briefly explain how your project or program benefits one or more areas.**

Project or program volunteerism opportunity. Briefly explain how Chef Works' charitable funding will be used in the proposed project/program. **Please do not request funds for operational expenses.**

Project or program volunteerism opportunity. Briefly explain how Chef Works employees may volunteer for the proposed project/program.

Partnership recognition opportunities. Please describe what types of **exclusive** partnership recognition opportunities you will offer Chef Works if your grant is approved. (i.e. media and press outlets, website presence, event program books, annual reports, etc).

CERTIFICATION

By signing this application, I certify that I am an authorized agent of this requesting organization, this organization complies with anti-discrimination laws and all 501(c)3 applicable laws, including those relating to tax-exempt status, charitable registration and reporting as defined by the Internal Revenue Service.

Signature

Title

Please email this completed form, along with the following to cwcharity@chefworks.com.

- Cover letter on charitable organization letterhead including Board of Directors
- 501(c)3 status
- Non-discrimination policy
- Supporting materials (i.e. event invitation, program description, etc)

Organizations will receive a confirmation by January 31st if the grant funding is chosen. Thank you for considering Chef Works for your charitable organization.

For Chef Works Use Only:

Date received: Fiscal year:

Approved? Yes No Check number:

Donation amt:

Authorized by:

Notes: