

Humboldt Sponsors, Inc.

2025 GRANT APPLICATION



Official Use Only – 2025 Grant Cycle
 Grant Amount _____
 Application Complete _____
 Report Accepted _____
 Amount Requested _____

The primary mission of Humboldt Sponsors is to raise funds solely to benefit the youth of Humboldt County.

Please complete this application by writing or typing in the box beside each question.

1. Organization Information	
Name of organization: _____ Address: _____ Contact person: _____ Phone: _____ Email: (required) _____	
Does your organization have a tax-exemption? *	<input type="checkbox"/> Yes <input type="checkbox"/> No Tax I.D. Number: _____ <i>(Humboldt Sponsors requires proof of tax-exempt status or proof of eligibility through a tax-exempt entity. Please note: State ID# letters or Secretary of State filings are not sufficient.)</i>
Name of agency/ organization holding tax-exemption: • Include Letter of Authorization if other than applicant. (Required)	
Grant Amount Requested <i>Grants typically range from \$500-\$3,000)</i>	\$ _____
How will the funds be used?* • Please be specific. <i>Excludes salaries, stipends, administrative/ operating costs.</i>	
How many children will benefit from these funds?*	
Location of program or event/activity:	
Date(s) of program or event/activity:	

* Do not leave this section blank.



<p>Is your organization presently receiving funds from any other source?</p> <ul style="list-style-type: none"> • Please list all sources and amounts. <i>(i.e. United Way, service groups, or local, state or federal funds, or private donations)</i> <p><i>If you require more space, please attach an additional page.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Source: _____</p> <p>For what purpose: _____</p> <p>_____</p> <p>_____</p> <p>Amount: \$ _____</p>
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<p>Board of Directors</p> <ul style="list-style-type: none"> • Please provide information about the leadership of your organization. 	<p>1. Name: _____</p> <p>Address: _____</p> <p>Phone: _____</p>
	<p>2. Name: _____</p> <p>Address: _____</p> <p>Phone: _____</p>
	<p>3. Name: _____</p> <p>Address: _____</p> <p>Phone: _____</p>

2. Detailed Narrative

<p>Please provide a detailed narrative about the program or event/activity only.*</p> <ul style="list-style-type: none"> • <i>Include program goals and objectives, and a detailed description of your program or event/activity. (Required)</i> <p><i>If you require more space, please attach an additional page.</i></p>	
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* Do not leave this section blank.



3. Detailed Budget

**Please submit a detailed budget for the program or event/activity.*
(Required)**

- Include a list of supplies, materials and their specific costs.
- If offering scholarships, please include the dollar amount of each scholarship, the total number offered & how you identify recipients.

(If you require more space, please attach an additional page.)

4. How will Humboldt Sponsors receive recognition for this contribution?

5. Number of volunteers and how they are used in this project?

Once completed, please enclose the original application plus ten additional copies (11 total: collated & stapled per checklist order) of all materials and mail by 5:00 p.m., Friday, February 7, 2025. This includes the signed application form, detailed narrative, budget, application checklist and all other required information.

**Mail to: Humboldt Sponsors Grants Committee
c/o Denise Christen
P.O. Box 730
Loleta, CA 95551**

Signature: _____

Date: _____

** Do not leave this section blank.*



We make good things happen for local kids!

