

Chamblee Nonprofit Partnership Program
Event/Program Sponsorship Application

Application Requirements

A finalized application consists of the completion of this form and the following items submitted as attachments:

- Articles of incorporation
 - ***Must be incorporated for at least two (2) years***
- Submit a copy of the most recent Internal Revenue Service Form 990
- Provide an audit or two (2) years of financial statements (i.e., profit/loss, income/expense or balance sheet)
- Projected project budget inclusive of anticipated revenue generated by other sponsorships, grants in-kind services or other forms of financial contributions

Applicant Information

Organization Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email Address: _____

Website: _____

How long has the organization maintained a 501(c)(3) status? _____

Project Point of Contact

First and Last Name: _____

Organizational Role: _____

Phone: _____ Email: _____

Status of Chamblee Nonprofit Partnership Program Membership

Is the organization a member of the Chamblee Nonprofit Partnership Program? Yes No

How many Let's Talk About... roundtable sessions has your organization attended? _____

List sessions and dates: _____

How many Lunch and Learn courses has your organization attended? _____

List courses and dates: _____

How many city events has your organization attended or plan to attend? _____

List courses and dates: _____

Project Information

Event/Program Name: _____

Type of Project: New Continued Expansion

Category of Project: Event Program

Date of Event/Program: _____ Event Time: _____

Duration (in days) of Event /Program: _____

Will your event/program take place in the City of Chamblee? Yes No

What is the projected attendance of the event? _____

If a program, what is the projected number of community members serviced by the program?

If applicable, provide the event location and address below:

Venue Name: _____

Venue Address: _____

Date final report will be submitted: _____

If revenue is received from the event, how will the revenue be distributed (i.e., fund a specific program, allocation to operational expenses, etc.)?

Briefly describe the event/program.

Briefly describe how your event/project will impact the Chamblee community.

How will the Chamblee NPP sponsorship be vital to the success of the event/program?

Project Budget Information

What is the projected cost (all expenses) of the organization's project? _____

Please provide an estimated project budget that includes anticipated revenue generated by other sponsorships, grants in-kind services or other forms of financial contributions.

If you will be receiving additional funds for this project, complete the following:

Funding Source: _____ Amount: _____

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Funding Source: _____ Amount: _____

What is the total amount you are requesting to be provided by the Chamblee Nonprofit Partnership Program? _____

Sponsorship funds will be distributed after receipt(s) from eligible businesses for expenditures are submitted. An eligible business must hold a current City of Chamblee Occupational Tax Certificate.

How will the event/program allocate the awarded funds?

FINAL REPORT

Final Report

Organization Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Project Name: _____

Project Coordinator Name: _____

Email Address: _____ Phone: _____

Date of Project: _____

Type of Project: New Continued Expansion

Category of Project: Event Program

Sponsorship Amount Received: _____

What was the attendance/participation? _____

Briefly summarize the success of the event/program.

What was the estimated direct impact to the Chamblee community?

Please explain the process used to determine the impact.

How were funds from the scholarship used?

What was the final project budget? _____

Please submit the final project budget.

If you will be received additional funds for this project, complete the following:

Funding Source: _____ Amount: _____

Funding Source: _____ Amount: _____

Funding Source: _____ Amount: _____

Funding Source: _____ Amount: _____

Additional information and comments:

***The information provided in this Final Report
is certified to be true and correct.***

Signature: _____

Printed Name: _____

Title: _____

Date: _____

All projects awarded a sponsorship must be completed, and a final report submitted within 90 days of the conclusion of the event. If receipts/report are not submitted as stipulated, the City of Chamblee reserves the right to void the sponsorship and/or not fund any future sponsorship requests.