



Funding Application for Amounts \$1,000 or less  
 Seabrook Association  
 Initial Screening Form

Applicant Information Data:

Full Name of Organization:

|                        |  |
|------------------------|--|
| Charter Name/State*    | State Incorporated   |
| Assumed Names if any.* |  |
| Charter Number*        |  |
| Non-Profit E.I.N.*     |  |
| IRS Activity Code*     |  |
| NTEE Code*             |  |
| Status                 | <input type="checkbox"/> Active <input type="checkbox"/> Dormant |

\*Please insert information as it applies to your requesting organization.

Address of Organization:

|                       |   |
|-----------------------|---|
| Street Address        |   |
| Postal (if different) |   |
| City, State           |   |
| Zip code              | - |

Telephone Contact: (\_\_\_\_)-\_\_\_\_-\_\_\_\_\_

Contact Person: \_\_\_\_\_

Email Address: \_\_\_\_\_@\_\_\_\_\_

Website (if available): \_\_\_\_\_

Brief Background of Applicant Organization:

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|                             |         |
|-----------------------------|---------|
| Amount of Funding Requested | \$_____ |
|-----------------------------|---------|

Purpose and General Objectives for the requested funding:

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Mission statement of requesting organization:

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Describe how your request for funds may benefit Seabrook and the surrounding communities.

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|  |

List of Officers

| <u>Title</u>   | <u>Name</u> |
|----------------|-------------|
| President      |             |
| Vice President |             |
| Secretary      |             |
| Treasurer      |             |

List of Directors

| <u>Title</u> | <u>Name</u> |
|--------------|-------------|
| Chairman     |             |
| Director     |             |
| Director     |             |
| Director     |             |
| Director     |             |

This form is intended for preliminary screening of funding requests. The Seabrook Association will consider the preliminary request for suitability and interest of our organization. We have developed a more detailed Funding Proposal Checklist of specific items as it may relate to each request and we may request an interview to be used in final determination for board approval. Information will be retained on a confidential basis.

*Prohibition of Inurement Notice: Many types of non-501(c)(3) tax-exempt organizations including social welfare organizations are prohibited, by statute, from allowing Inurement of net earnings or assets of the organization to benefit any insider. An insider is a person who has a personal or private interest in the activities of the organization such as an officer, director, or a key employee.*

Submitted by:

\_\_\_\_\_  
 Authorized Signature

Date: \_\_\_/\_\_\_/\_\_\_\_\_

Please submit your request by mail to:

The Seabrook Association  
 P. O. Box 1107  
 Seabrook, Texas 77586-1107