

PREVIEW OF ON-LINE APPLICATION FORM * Indicates Required Field

Applicant Information		
Organization Submitting Application		
*Organization Name		
Text – 55 character maximum		
Legal Name		
Text – 55 character maximum		
Also Known As		
Text – 55 character maximum		
*Tax ID Number		
Text – 12 character maximum	,	
*Phone Number	(xxx-xxx-xxxx)	
Text – 20 character maximum		
Organization's Web Address		
Text – 50 character maximum		
*Street Address Text – 55 character maximum		
*City		
Text – 55 character maximum		
*State		
Single-Select List		
*Postal Code		
Text – 10 character maximum		
Organization's Chief Executive Officer (or Execu-	tive Director)	
•		
*Chief Executive Officer's Prefix		
Single-Select List		
*Chief Executive Officer's First Name		
Text – 35 character maximum		
*Chief Executive Officer's Last Name		
Text – 35 character maximum		
Chief Executive Officer's Suffix		
Single-Select List *Chief Executive Officer's Title		
Text – 55 character maximum		
*Chief Executive Officer's Office Phone		
Text – 20 character maximum		
*Chief Executive Officer's Email Address		
Text – 55 character maximum		
Primary Contact Person for this Application		
*Request Primary Contact Prefix		

*Request Primary Contact First Name	
Text – 35 character maximum	
*Request Primary Contact Last Name Text – 35 character maximum	
Request Primary Contact Suffix	
Single-Select List	
*Request Primary Contact Title	
Text – 55 character maximum	
*Request Primary Contact Office Phone	
Text – 20 character maximum	
*Request Primary Contact Email Address	
Text – 55 character maximum	
Organizatio	n Information
Mission Statement and Background	
*Mission Statement	
Text – 300 word maximum	
*Brief Organization History	
Text – 500 word maximum	
*Organization's Total Annual Budget	
Format: \$xxx,xxx,xxx	
*Administrative Expenses as a Percent of Total	
Budget	
*Organization's Fiscal Year End Date	
Select from Calendar	
*Organization's Focus Area	Choose from Conservation & Environment, Early
Single-Select List	Childhood Education, Empowering Families and
3	Individuals for Success, Health
	marriadas for Saccess, recalen
Request I	nformation
	ides funding for capital campaigns and ere Cox Enterprises, Inc. does business.
Information Relating to Request	are GOX Effect prises, inc. does business.
<u> </u>	
*Cox Business Location	If you are located outside of metro Atlanta,
	enter the Cox business location where dollars
	would be spent.
*Project Title	Please provide a very brief description of your
Text – 25 word maximum	project
*Type of Support Single-Select List	Choose from Capital or Special Project Support
*Conservation Efforts (Capital-related projects)	Please describe any efforts being undertaken or
Text – 250 word maximum	planned to maximize energy efficiency, reduce
-	waste, and conserve water as part of the project.
*Project Description	
*Project Description	What are you asking us to provide funding for?
Text - 1000 word maximum *Project Start Date	
*Project Start Date Select from Calendar	
*Project End Date	
•	
Select from Calendar	
Select from Calendar *Project Need	Describe the specific peeds filled by this project
*Project Need	Describe the specific need(s) filled by this project.
	Describe the specific need(s) filled by this project. What are the consequences if you do not do this work?

*Mission Fulfillment	Describe how this project fulfills the	
Text – 500 word maximum	organization's mission/purpose	
*Program/Project Status	Describe where in the development process/roll	
Text – 500 word maximum	out you are with this program/project.	
*Program/Project Experience Text – 500 word maximum	What is your organization's experience with this	
	type of program/project?	
*Collaboration	What other organizations are you partnering with	
	for this project/program?	
*Project Budget	Provide the total budget for this project.	
Format: \$xxx,xxx,xxx		
*Request Amount	What amount are you requesting?	
Format: \$xxx,xxx,xxx		
*Project Revenue and Expense Budget Detail	Attach spreadsheet of revenue and expense	
	budget detail.	
*Project Revenue and Expense Budget Narrative		
Text – 500 word maximum		
*Requested Amount as a percentage of the		
organization's total budget		
Text – 10 character maximum		
*Requested amount as a percentage of the		
organization's total project/capital campaign		
budget		
Text – 10 character maximum		
Other Commitments for the Project:		
*Other Major Funding Commitments	Please attach a list of other major funding	
	commitments for the project specified in this	
	grant request (names and amounts).	
*Other Major Solicitations	Please attach a list of other major solicitations	
,	(names and amounts) for the project specified in	
	this grant request.	
*Amount contributed towards annual operating		
budget by the Board of Directors/Trustees.		
budget by the bourd of birectors, trustees.		
*Percentage of annual operating budget		
contributed by Board of Directors/Trustees.		
*Amount contributed towards the project		
specified in this grant request by the Board of		
Directors/Trustees.		
*D		
*Percentage of project specified in this grant		
request contributed by the Board of		
Directors/Trustees.		
*Ethnicity		
Single-Select List		
*Gender		
Single-Select List		
Project Success		
*Impact and Monitoring	Please list the following:	
Text – 500 word maximum	Trease list the jollowing.	
. cc 500 Hora maximum	<u>l</u>	

	Your Overall Expected Outcome, the Direct
	Beneficiaries Group, Number of Direct
	Beneficiaries, and the Success Metric for Primary
	Goal or Objective
*Award Communication	What kind of recognition and communication
Text – 200 word maximum	does your organization provide?
Evaluating The Success of Your Project	
*Project Success	Explain how you will measure the success of this
Text – 500 word maximum	project.
*Project Timeline	What is the expected timeline to achieve success
Text – 300 word maximum	or completion of your project?
*Sustainability	Explain how you plan to sustain this work beyond
Text – 500 word maximum	the grant period

Attachments

The following attachments are required:

- 1. A complete list of your board of directors including any company or community affiliations.
- 2. A copy of your most recent financial statements (audited if available).
- 3. A copy of your organization's most recent fiscal budget.
- 4. IRS Form 990 (most current)
- 5. *If located outside Metro Atlanta*, a letter of support from GM (or equivalent) at your local Cox business.

NOTE: Documents with graphics should not be attached to assure file size does not exceed limit.