

COMMUNITY EVENT SPONSORSHIP 2017-2018 APPLICATION FORM



LEAD APPLICANT INFORMATION

Organization Name	
Organization Address	
Main Contact Name	
Main Contact Phone	
Main Contact Email	
Date Submitted	

EVENT DETAILS

Name of Event	
Sponsorship Amount Request (Up to \$500)	
Sponsorship Levels (if applicable)	
Date of Event	
Time of Event	
Location of Event	

TRADITIONAL ELEMENTS

What is the target audience and/or population that will benefit from this event?	
<input type="checkbox"/> African/African American/Black <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Asian/Asian American <input type="checkbox"/> European American/Eastern European/White <input type="checkbox"/> Latino/Hispanic <input type="checkbox"/> LGBTQ	<input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> Immigrant <input type="checkbox"/> Refugee <input type="checkbox"/> Disability <input type="checkbox"/> Urban <input type="checkbox"/> Rural
Is this your organization's first time applying for UWCW Funds:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

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ALIGNMENT

Please explain how this event contributes to United Way's mission and strategic goals.

RACIAL EQUITY

Please explain how this event promotes social and/or racial equity

UPSTREAM INVOLVEMENT

Does this event support individual and/or systematic advocacy? If so, please explain how.

CONTINUOUS QUALITY IMPROVEMENT & KNOWLEDGE BUILDING

Does this event improve knowledge around an identified need? If so, please explain how.