

## Hockley County

AN AFFINATE OF COMMUNITY FOUNDATION OF WEST TEXAS

Dear Hockley County Non-Profit,

ENDOWMENT ADVISORY BOARD

We are writing to your club, organization or school to let you know that we will be taking applications for 2017, until July 31st of 2017. This year we have \$13,492.47 to award to our Hockley County non-profits.

Michael Wilest - Chair

Sarah Thompson -

The endowment fund is now over \$578,000 and growing daily and with each passing year, the amount we award in grants grows with it.

Vice Chair Sarah Osburn -

Why are we writing to you?

Sec/Treasurer

Carrie Ellis Amber Hinson

We would like to award a grant to YOU if you have a project in need of funding.

Alycyn Keeling

What do you need to do?

Ricky Lawless

See our contact information below or visit us online at: Wanda Lawless

J.R. Manning Steve Melton

www.hockleycountyendowment.org and click on GRANTS and then click on

Tania Moody

GRANT APPLICATIONS

Joey Pierce Erik Rejino

Fill out the form online and print, or see the included one sheet form. Make sure you include the items on the checklist. Drop by: 611 N. West Avenue (KLVT

Tenner Terrell

Radio, Attn: Michael Wiiest) or mail to the address below.

If you have any questions, please email: michael@klvtradio.com or give me a call at 806-893-9341.

Thank you for all you do to serve the communities in Hockley County and we hope that if you don't have a need right now, that you will utilize us in the future.

Thank you,

Michael Wijest

Chair - Hockley County Endowment

P.O. BOX 1115 ~ LEVELLAND, TX 79336

Facebook: Hockley County Endowment WWW.HOCKLEYCOUNTYENDOWMENT.ORG

an affiliate of Community Foundation of West Texas



## LEVELLAND AREA ENDOWMENT PROPOSAL SUMMARY

| ORGANIZATIONAL INFORMATION   |                             |                            |  |
|--|-----------------------------|----------------------------|--|
| Legal Name of Applicant Organization:  |                             |                            |  |
| SAA A I I  |                             |                            |  |
| Street Address:  | Mailing A                   | Address (if not the same): |  |
|  |                             |                            |  |
| Phone:   | Fax:                        | Fax:                       |  |
| Web Site:  | E-Mail:                     |                            |  |
| Employer ID Number:  | Year Organized/Established: |                            |  |
| Mission Statement & Geographic Service Area:   |                             |                            |  |
|  |                             |                            |  |
|  |                             |                            |  |
|  |                             |                            |  |
| Executive Director:  |                             |                            |  |
|  |                             |                            |  |
|  |                             |                            |  |
| PROJECT INCODMANDON  |                             | 8.46                       |  |
| PROJECT INFORMATION Project Coordinator:   | Dhama                       | 70 B.C21.                  |  |
| Troject Coordinator:   | Phone:                      | E-Mail:                    |  |
| Title:   |                             |                            |  |
| Brief project description:   |                             |                            |  |
|  |                             |                            |  |
|  |                             |                            |  |
|  |                             |                            |  |
|  |                             |                            |  |
|  |                             |                            |  |
|  |                             |                            |  |
|  |                             |                            |  |
|  |                             |                            |  |
| Amount requested: \$   | Total Pro                   | oject Budget: \$           |  |
| Part - 4 C4 - 4/E 1 Pa 4   |                             |                            |  |
| Project Start/End Dates:   |                             |                            |  |
|  |                             |                            |  |
| Checklist:   |                             |                            |  |
| Proposal Narrative containing:   |                             |                            |  |
| Description of the project and the need for it within the community.   |                             |                            |  |
| Specific use of funds requested.   |                             |                            |  |
| A brief statement of the capability of personnel responsible for project implementation.                     |                             |                            |  |
| <ul> <li>List of grants received/pending related to the project and plans for additional funding.</li> </ul> |                             |                            |  |
| A plan for evaluation of project success.  |                             |                            |  |
| Plans for project continuation.  |                             |                            |  |
| Project budget   |                             |                            |  |
| Proof of tax-exempt status — 501(c)(3) or equivalent   |                             |                            |  |
| Current annual operating budget and year-to-date financial statement   |                             |                            |  |
| Copy of most recent audit (if no audit, current financial statement)   |                             |                            |  |
| List of Board of Directors   |                             |                            |  |
| Resolution from Board of Directors/Governing Body approving the application                                  |                             |                            |  |
| Mail: All attachments and ten (10) copies of the narrative and project budget sections to P.O. Box 1115;     |                             |                            |  |
| Levelland, Texas 79336   |                             |                            |  |