

Community Program Application Cover Page

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Name of Organization

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Contact Name

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Position

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Address

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Postal code

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Telephone

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Fax

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Email

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Charitable Registration Number

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Total Organizational Revenue (from  
last audited statements)

This application is for:

- Communities in Action
- Metcalf Renewal Fellowship Program
- Metcalf Innovation Fellowship Program

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Amount Requested

For Communities in Action and the Metcalf Innovation Fellowship please provide a project title and description (250 words or less).

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Signature

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Date

This form must be attached to your application.