



## Rising Tide Community Investment Fund Grant Application

**The Rising Tide Community Investment Fund was established within the Twin Pines Cooperative Foundation. We are part of the Twin Pines “Give Where You Live Campaign.”**

The purpose of our Community Investment Fund is to provide grants of \$100 to \$300 to support local groups working in the following areas: **Environment • Community • Food & Hunger • Cooperatives**

The following are examples of projects that the Rising Tide Community Investment Fund would consider funding:

- Environment: sustainability projects, recycling, alternative transportation
- Community: health care, social service, service groups, community events
- Food & Hunger: alternative agriculture, organic farming, food banks
- Cooperatives: co-op organizations, development, education

**Funds will be disbursed only to organizations which are tax exempt 501(c)3.** Funds cannot be provided to groups engaged in political activities, lobbying or activities unrelated to the above four categories. **A written report will be required at the end of this project.**

For more information, please contact [cif@risingtide.coop](mailto:cif@risingtide.coop)

Today's Date: \_\_\_\_\_

1. _____ <small>Legal name of organization</small>	_____ <small>Telephone number</small>
2. _____ <small>Address of organization (Street, Town, Zip)</small>	
3. _____ <small>Director/faculty Advisor</small>	_____ <small>Director email</small>
4. _____ <small>Contact person for this application</small>	_____ <small>Contact telephone number</small>
	_____ <small>Contact email</small>

5. Principal purposes and services of your organization:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. Geographic area served: \_\_\_\_\_

7. Which category(s) will your project impact?

- a. \_\_\_\_\_ Environment
- b. \_\_\_\_\_ Community
- c. \_\_\_\_\_ Food & Hunger
- d. \_\_\_\_\_ Cooperatives

8. Amount Requested \$ \_\_\_\_\_  
Period of time in which funds will be spent: from \_\_\_\_\_ to \_\_\_\_\_

9. Specific purpose for which funds are requested: \_\_\_\_\_ Is this a new program? Yes No  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. Explain in detail how your project will operate.  
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\_\_\_\_\_  
\_\_\_\_\_

11. Please attach a copy of the IRS letter stating your 501(c)3 status.

**I understand that my organization will be required to submit a written report (no more than one page) within 30 days of the completion of this project.**

\_\_\_\_\_  
Signature of Director/Faculty Advisor

\_\_\_\_\_  
Signature of Contact person