



United Way of Ponca City
205 N. 2nd St Ponca City, OK 74601
Ph. 580.765.2476 Fax 580.765.8369

2015-2016 Funding Cycle FY16

LETTER OF INTENT

Issue Date: April 27, 2015
Deadline to Submit: Monday, May 11, 2015 @ 12:00pm

LETTER OF INTENT COVER SHEET

All new organizations requesting funding for 2015-2016 must complete the following Letter of Intent. Please submit electronically to Melissa Young, UW Executive Director: uwcampaign@cablone.net by Monday, May 11th, 2015, at 12:00 pm. Please complete a separate Letter of Intent for each program for which you are requesting funding. If this is a collaborative effort, the lead 501(c)3 organization should complete the Letter of Intent. Qualified applicants will be notified May 29th, 2015 by letter, Request for Proposal will be available June 8th, 2015 at 12:00 pm and a complete Request for Proposal (RFP) will be due by Friday, August 7th, 2015, at 12:00 pm. Any questions should be directed to Rhonda Stolhand at 761-5935.

Organization Name:

Main Office: _____
(Street Address) (City, State, Zip)

(Mailing Address, if different from above) (City, State, Zip)

Phone: _____ **Fax:** _____ **Email:** _____

Organization Director: _____

We certify that all information included in this Letter of Intent is accurate.

President, Treasurer and Agency Director signature must appear below.

President (type name)

President's Signature

Treasurer (type name)

Treasurer's Signature

Agency Executive (type name)

Agency Executive's Signature

ELIGIBILITY REQUIREMENTS

Please check each eligibility requirement below to indicate the organization's commitment and ability to fulfill the requirement. Return this form with your request. All information is required in order to be considered for funding; however, **please DO NOT include these supporting documents with the Letter of Intent.** If the United Way requests a full proposal from your agency, the supporting documents will be necessary at that time.

___ Clear mission statement for the organization

___ Articles of Incorporation and exemption from Federal income tax under section 501(c)3

___ Current list of Board of Directors/governing body

___ Current set of by-law

___ The audited financial statements must cover the fiscal period ending not more than 18 months prior to Jan 2015. (i.e. Audit must be dated June 30, 2013, or after.)

___ IRS form 990, including schedule A or 990 EZ (State and Federal applications require additional paperwork for 990)

___ Current budget for **entire organization**, including expected revenue and expense

___ Year to date financial statements (balance sheet and income and expense statement)

___ Current budget for **specific program** requesting funding, including expected revenue and expense

___ Has ability to identify and measure outcomes and report results

___ Framework has been reviewed

PROGRAM INFORMATION

Program Name:

Name of program contact person:

Phone:

Email:

Mission of program:

Focus Area: (check one)

Education

Income

Health and Safety

FY 2016 Program Funding Requested \$

Is this a new program:

If no, how long has this program been in operation?

Program description: Please attach narrative no longer than 1 page in single-spaced 12-point Arial font.

- Provide brief description of the program.
- Explain the significance/importance of the program.
- Describe population served by program.
- Brief description of similar services in Ponca City and what makes your program unique/different.

For United Way Office:

Date Received: Time received: Received by:

Qualified: Not qualified: