



<input type="checkbox"/>	New Application	<input type="checkbox"/>	Renewal Application	DATE:		TRIBE/NATION:	
ORGANIZATION NAME:							
PRIMARY ADDRESS: <i>(Mailing Address)</i>							
PHYSICAL ADDRESS:							
WEBSITE ADDRESS:							

AFFILIATE APPLICATION COVERSHEET 2016-17

PRIMARY CONTACT		SECONDARY CONTACT <i>(must include an alternate contact)</i>	
NAME:		NAME:	
TITLE:		TITLE:	
PHONE:		PHONE:	
EMAIL:		EMAIL:	
FAX:		FAX:	
OTHER:		OTHER:	

AFFILIATE APPLICATION CHECKLIST

Please include the following items (A narrative (2-3 pages) describing your project's history, project activities and current work including):

	MISSION STATEMENT OF YOUR PROJECT <i>(A vision of your overall arcing project goal)</i>
	ORGANIZATIONAL GOALS AND OBJECTIVES <i>(A detailed target with described outcomes of current approaches)</i>
	LIST OF KEY STAFF, VOLUNTEERS AND CONSULTANTS <i>(A list of key stakeholders and their role involved with meeting project deliverable)</i>
	LIST OF BOARD MEMBERS, ORGANIZATION, TITLE AND TRIBAL AFFILIATION
	CURRENT ANNUAL FISCAL YEAR PROJECT BUDGET (JULY 1ST – JUNE 30TH) <i>(includes key costs and description of each line item)</i>
	LIST OF PROPOSED AND/OR COMMITTED FUNDING SOURCES AND DONATIONS <i>(includes identified sources of resources this fiscal year)</i>
	LIST OF PROPOSED PROJECT ACTIVITIES DESCRIBING DETAILS OF PROJECTED BENEFITS AND OUTCOMES WITH EVALUATION METHODS

After we have received and reviewed your application, we will notify the Primary Contact listed regarding the status of your Affiliate Application.

Questions, please contact Marva at 707.825.7640 x112 or marva@7genfund.org or affiliate@7genfund.org

Please return to: Seventh Generation Fund for Indigenous Peoples, Inc.
 ATTN: Marva Jones, Affiliate Program Officer
 PO Box 4569
 Arcata CA 95521
 Or marva@7genfund.org

