

PASCUA YAQUI TRIBE CHARITABLE ORGANIZATION

APPLICATION FOR ASSISTANCE

Today's Date: _____ Contact Phone: _____

Requester Name (Print): _____

Mailing Address: _____

E-mail: _____

Organization/Team Name: _____

Address: _____

Amount requested: _____

Please Select Your Cause Category: Sports __ Cultural-Language and History Preservation __
Nutritional Support __ Education __ Arts and Music __ Humanitarian Aid to Traditional Yaqui Villages in Sonora Mexico __
General Community Assistance __

Description/Purpose of the Assistance Requested: (20 points) receive

How does this Benefit the Community?: (20 points)

It is important that PYTCO is not your only funding source. Please list any other fund-raising activities you or your group has participated in. (20 points)

Proposed use of funds. Include estimated cost or budget: (20 points)
(Please be detailed on item costs. Attach additional pages as necessary.)

➤ Is your cause benefitting Temporary Assistance for Needy Families recipients? Yes __ No __ (20 points)

- Is your cause benefitting low-income residents of Arizona living at or under 150% of the federal poverty level? Yes__ No__ (20 points)
- Is your cause benefitting children in Arizona who have a chronic illness or physical disability (defined as children who are under 21 years of age and whose primary diagnosis is a severe physical condition which may require ongoing medical or surgical intervention)? Yes __ No__ (20 points)

- Applications will be evaluated based on a total score of 160 points.
- Each question is assigned points and applicants will get an automatic 20 points for filling out the application completely.
- A “yes” on the last three questions require proof/explanation must be attached to this application.
- Selections will be made quarterly on the last month of each quarter.
- Grant recipients will be notified and awarded prior to the last day of the quarter.
- Applications must be submitted by the first day of the last month of the quarter to be considered for that quarter. (December 1st, March 1st, June 1st, September 1st).
- Applications submitted after the first day of the last month of the quarter will be considered in the next quarterly grant cycle.

Signature: _____ Date: _____

Applicants do not write below this line:

Total Points Awarded: _____

Board Approved

Board Denied

Please provide rational