

Corporate Giving Application

Organization Contact Information and Service Demographics

Name of Organization	Are you a 501(c)(3) organization?
Contact Person at Organization	Title
Address	Telephone Number
E-mail Address	Nine-digit Federal Identification Number
Organization Budget and Project Budget (if applicable)	Website Address and Link to Annual Report
Amount Requested	General Operating or Program Support? (include project name)
<p>What geographic area does your organization serve?</p> <input type="checkbox"/> St. Paul Midway and surrounding communities (e.g., Rondo, Frogtown) <input type="checkbox"/> St. Paul Midway AND greater Twin Cities (within seven-county metro area) <input type="checkbox"/> Greater Twin Cities (within seven-county metro area) <input type="checkbox"/> Other (Please describe) _____ _____	<p>Within which focus area of Economic Inclusion does this request fit?</p> <input type="checkbox"/> Financial Stability (through essential needs) <input type="checkbox"/> Financial Sustainability (through access to gainful employment) <input type="checkbox"/> Financial Security (through financial skill building and abuse prevention)
<p>What percentage of the following income levels represent those served by your organization/program?</p> <p>Low income _____ % Moderate income _____ % Middle income _____ % Upper income _____ % Total must equal 100%</p>	<p>What percentage of the following racial/ethnic populations does your organization/program serve?</p> <p>American Indian or Alaska Native _____ % Native Hawaiian or other Pacific Islander _____ % Asian _____ % White _____ % Black or African American _____ % Two or more races _____ % Hispanic or Latino _____ % Total must equal 100%</p>
<p>What is the race/ethnicity of your organization's leadership team? (Indicate number of executive staff in each category.)</p> <p>American Indian or Alaska Native _____ Native Hawaiian or other Pacific Islander _____ Asian _____ White _____ Black or African American _____ Two or more races _____ Hispanic or Latino _____</p>	<p>Checklist of Attachments</p> <p>Please provide the following documentation along with your grant application:</p> <input type="checkbox"/> Organizational budget and the program budget, if applicable <input type="checkbox"/> IRS tax exempt letter <input type="checkbox"/> Financial statements from your most recently completed fiscal year, audited, if available <input type="checkbox"/> List of officers and directors of the organization and their affiliation (no need to include if this is listed on your website)

Narrative

1. Organization's mission statement.

2. Provide a summary of your funding request. Include **what** you want us to fund, **who** it will serve, **why** it is critical, and **how** it fits the Allianz focus area of financial stability, sustainability, or security.

3. How does your organization/program increase equity or reduce disparities?

4. How is your organization/staff uniquely qualified to implement this work/program?

Community Impact

5. What goals do you have for long-term financial stability, sustainability, and/or security of the population you serve? What long-term success metrics do you currently measure or will you measure to reach those goals? How do you currently or how will you measure them? **Please be specific.** Examples include but are not limited to: number of people served that have a plan for lessening their reliance on donations of essential goods, number of people gaining and sustaining employment or housing, number of people who saved or paid down debt or created a financial plan, etc.

6. How does your work intersect or work in collaboration with other efforts in the community?

7. How will this funding make a difference to the organization/program?

8. List top funders and amounts. If applying for a program grant, signify other funders of this program.

Community Engagement

9. What communication ideas/tools do you have to amplify/promote the partnership?

10. Do any Allianz Life employees currently volunteer with your organization? If yes, please provide their name(s)/role(s).
If general/group volunteers, please only include the total number of volunteers.

11. In what other ways could Allianz potentially support your organization? Consider general or skills-based volunteerism, opportunities/events highlighting your efforts, board/committee membership, etc.
