# Where Commitment to Educators and the Community Meet



Thank you for your interest in the ēCO Credit Union Foundation Grant Program. The mission of the ēCO Credit Union Foundation is to promote financial literacy in schools and the communities we serve. Our goal is to prepare people of all ages to make well-informed financial decisions to prepare themselves for a successful future. Please read carefully the following criteria and application requirements.

## **Project Selection Guidelines:**

- Funding must be consistent with the mission of the eCO Credit Union Foundation.
- Grant requests must demonstrate ability to meet needs and have specific goals.
- Recipients of eCO Credit Union Foundation funding must be:
  - Located in the counties served by ēCO Credit Union,
  - Able to provide receipts showing appropriate use of funds within three months of receiving the grant.

#### **Limitations:**

- ēCO Credit Union Foundation funding is limited each quarter.
- ēCO Credit Union Foundation decisions are final.

### **Instructions:**

- 1. The Grant Application must be typed. All sections must be completed.
- 2. Submit only one copy of the application. Email submission is accepted.
- 3. Additional materials (articles, photos, etc.) may be included but are not necessary for the initial request.
- 4. Applications must be submitted by March 1, June 1, September 1, or December 1 to be considered during the guarter.

Questions about the eCO Credit Union Foundation or the grant application should be submitted to:





# **Grant Application:**

Organization Street Address City, State, Zip Code Primary Contact Person/Title Telephone/fax number(s) E-Mail Address Date Submitted  of Event or Program:  I Grant Amount Requested:  ose of Grant and Program Description:  will the requested grant promote financial literacy in your organization?	Contact I	nformation
Street Address City, State, Zip Code Primary Contact Person/Title Telephone/fax number(s) E-Mail Address Date Submitted  of Event or Program:  Grant Amount Requested:  ose of Grant and Program Description:  will the requested grant promote financial literacy in your organization?	Contact ii	
City, State, Zip Code Primary Contact Person/Title Telephone/fax number(s) E-Mail Address Date Submitted  of Event or Program:  Grant Amount Requested:  ose of Grant and Program Description:  will the requested grant promote financial literacy in your organization?	Organizati	on
Primary Contact Person/Title Telephone/fax number(s)  E-Mail Address Date Submitted  of Event or Program:  I Grant Amount Requested:  ose of Grant and Program Description:  will the requested grant promote financial literacy in your organization?	Street Add	ress
Telephone/fax number(s)  E-Mail Address  Date Submitted  of Event or Program:  Grant Amount Requested:  ose of Grant and Program Description:  will the requested grant promote financial literacy in your organization?	City, State	Zip Code
E-Mail Address Date Submitted  of Event or Program:  Grant Amount Requested:  ose of Grant and Program Description:  will the requested grant promote financial literacy in your organization?	Primary Co	ntact Person/Title
of Event or Program:  Grant Amount Requested: ose of Grant and Program Description:  will the requested grant promote financial literacy in your organization?	Telephone	/fax number(s)
of Event or Program:  I Grant Amount Requested:  ose of Grant and Program Description:  will the requested grant promote financial literacy in your organization?	E-Mail Ado	ress
will the requested grant promote financial literacy in your organization?	Date Subm	itted
ose of Grant and Program Description: will the requested grant promote financial literacy in your organization?		
ose of Grant and Program Description:  will the requested grant promote financial literacy in your organization?  t are your goals for the program?	ıl Grant Amoı	nt Requested:
	ose of Grant	and Program Description:
	will the requ	ested grant promote financial literacy in your organization?