



Day of Portugal Organization

P.O. Box 40564....New Bedford, MA 02744

CHARITY APPLICATION

Deadline- Must be received no Later than APRIL 2, 2014

Name of Organization

Non-Profit Status: Tax ID #

Mailing Address

Name of Representative (Primary Contact)

Title of Representative

Telephone Number

Fax Number

E-Mail Address

A description of the organization, its mission and its achievements

List the needs of your organization including a budget for the request

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How will your organization benefit from this scholarship

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The committee reserves the right to request further information as well as visit the organization, prior to awarding the funds.

The undersigned certifies that they are authorized to represent the organization applying for the charity scholarship and the information contained in this application is accurate.

Print Name: _____

Signature: _____ Date: _____

Title: _____

PLEASE RETURN COMPLETED APPLICATION TO:

New Bedford Day of Portugal – Scholarship Chair
Scholarship Committee
P.O.Box 40564
New Bedford, MA 02744