INSTRUCTIONS FOR COMPLETING THE APPLICATION FOR ELIGIBILITY FORM
(Please type or print in blue or black ink only)

SECTION I: Provide the full legal name of your organization on the first line of this section. Provide the mailing address of your organization as recognized by the U. S. Postal Service. Include ZIP Code. Provide the street address if different from mailing address, or provide directions if located on a rural route or other remote area. List county in which the organization is actually located and a business telephone number with area code.

SECTION II: Check the appropriate box which describes your organization. (If you are unable to determine which status to check, please contact this office for assistance.)

SECTION III: Check the appropriate box or boxes (check as many as apply) which indicates the type or purpose of your organization. (Definitions have been provided on the reverse side of the application to assist in making this determination.)

SECTION IV: A comprehensive written description of all programs or services provided is required. A description of the operational facilities should also be included. Be sure to include information on staff and staff qualifications, hours of operation, services and programs offered, population or enrollment, fees charged etc.. Include samples of pamphlets, catalogs, brochures or posters. If incorporated, include complete copy of Articles of Incorporation with all filing certificates and amendments, and a copy of your current By-Laws.

SECTION V: Check the appropriate box which indicates the organization's sources of funding. Supporting documentation indicating the types and amounts of funding must be submitted with the complete application.

SECTION VI: All applicants making applications as "Nonprofit, tax-exempt organizations" must provide a copy of the IRS determination letter indicating tax exemption under Section 501 of the I.R.S. Code of 1954. The name of the organization on this IRS Letter **must** match the name provided in Section I of this application, if not, include sufficient evidence such as amendments to Articles of Incorporation, or Assumed Name filing certificates to establish an "audit trail" of names showing the legal connection.

SECTION VII: Applicants making application as "Nonprofit, tax-exempt organization" are required to submit evidence that the applicant is **currently** approved, accredited, or licensed. Programs for older individuals must include evidence of funding under the Older Americans Act of 1965; Titles IV or XX of the Social Security Act; Titles VIII or X of the Economic Development Act of 1964; or the Community Services Block Grant Act. Providers of assistance to homeless individuals must include a letter from the mayor, county judge, city or county health officer or comparable authority which certifies that applicant is a "provider of assistance to the homeless." The certification must identify the service or assistance being provided and the number of individuals receiving such assistance.

SECTION VIII: Annotate date and provide an **original** signature of applicant's Authorized Official (President, Chairman of the Board, County Judge, Mayor, City Manger, Executive Director, Administrator, Fire Chief, or other comparable authorized official). Photo copied, rubber stamped, machine produced, carbon, or other facsimile type signatures are not acceptable.

NOTE: INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED. USE THIS INSTRUCTION SHEET AS YOUR CHECK LIST TO ASSURE ALL REQUIRED INFORMATION AND DOCUMENTATION IS PROVIDED. IF YOU HAVE A QUESTION OR NEED ASSISTANCE CALL _____ .