

Mott/Echo Small Grant Application Cover Sheet

**Name of Your
Organization**

Mailing Address

City

State

Zip

Phone

Fax

Website

E-Mail

**Lead Project
Contact Person**

Number of years your organization has been funded by Echo/Mott: _____

Are you incorporated? _____ **If yes, in what state?** _____

If yes, please attach a copy of your IRS determination letter.

If your organization is not incorporated, please provide the following information about your fiscal sponsor and attach a copy of your sponsor's IRS determination letter and your memorandum of understanding with your fiscal sponsor:

**Name of Fiscal
Sponsor**

Mailing Address

City

State

Zip

Phone

Fax

Website

E-Mail

Contact Person
