Attachment 10 - Letter of Intent to Apply for Family Support Funding

Required Document to Apply For Funding

Submission deadline Wednesday, December 13, 2017 by 1:00 p.m. via email to sgonzalez@First5SBC.org

Organization Name:		
Address:		
Contact Person:	**Title:**	
Email:		
Business Phone:	**Cell Phone:**	

1. Has the Organization received First 5 Family Support, System Change, Capacity Building funds within the last four years?

☐ **Yes,** continue to number 4 ☐ **No,** continue go to number 2

2. If organization has not received First 5 funds provide two funding references that First 5 can contact and then go to number 3:

a.	**Name:**	**Agency:**
	Phone:	**Email:**
b.	**Name:**	**Agency:**
	Phone:	**Email:**

3. Briefly describe previous work that your organization has conducted in the past that makes your organization well qualified to do the work for which funding will be sought (keep text to box size, no additional pages will be accepted): When completed go to number 4.

4. Sign and submit to Sara Gonzalez sgonzalez@First5SBC.org by deadline of Wednesday December 13, 2017 by the 1:00 p.m. deadline

Signature:	**Date:**

Revised 11/2/17