Taiwanese American Foundation of San Diego Taiwanese American Community Center 聖地牙哥合美基金會 台湾中心						
Federal Non-Profit Organization Tax Identification: 33-0709735 7838 Wilkerson Court, San Diego, CA 92111 Tel : 858-560-8884 Email : taiwancenter@gmail.com						
研究創新獎金申請表 Grant for start-up & innovative project Application Form						
<b>1. APPLICANT INFORMATION:</b> English name:	_					
Date of birth:						
Address:	-					
Phone: (C) (O)						
<ul> <li><b>2. ABOUT THE ORGANIZATION (Please skip Sections 2 and 3, if the applicant is an individual.)</b> <ul> <li>a. Type of organization:</li> <li> Charity Service</li> <li> Academic Professional</li> <li> Social Political</li> </ul> </li> </ul>						
<ul> <li>b. Membership Organization?</li> <li>NoYes; current size of membership:</li> <li>Annual due: \$</li> </ul>						
e. Attach names and titles of the officers and directors/trustees (including Taiwanese names, if any.)						
3. PURPOSE OF THE ORGANIZATION						
a. Purpose or mission of the organization:						
b. Activities sponsored by the organization, or services provided by the organization:						
4. PROPOSED PROGRAM FOR WHICH THE GRANT IS SOUGHT:						
a. Program Title:						
b. Person in charge (if different from the applicant above):						
Phone: E-mail:						

c. Description of the program what, when and where: (Attach flyers and program brochures, if available.)
d. Purpose of the program and specific objectives the program intends to achieve:
e. Number of anticipated participants / attendants: f. Budget and other sources of funding: g. Will any officer/director/trustee receive benefits from this program? NoYes (please explain):
5. TERMS OF THE GRANT
a. The grant must be returned to TAFSD promptly if the proposed program is canceled for any reason. TAFSD reserves the right to recall the grant if the program is substantially changed or delayed.
b. The applicant shall submit a Project summary to TAFSD no later than six months of the receiving the grant after the program started or completed, stating the actual number of program participants/ attendants, revenues and expenses, and an assessment of the outcome relative to the objectives stated in 4-d above.
c. The applicant agrees to acknowledge TAFSD' support, commensurate with the grant received, in public announcements, promotional materials and publications related to the program.

I declare that the above information is true to the best of my knowledge, and that I agree to abide by the terms of the grant.

Name:	( print )	
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Signature:	-
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Date:			

## Checklist:

- Application form
- Proposal or project summary
- 2 recommendation letters