



<p>APPENDIX I - THE APPLICATION</p> <p>Organization Name: _____</p> <p>Series XV-B – General Assistance Grant</p>
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Series XV-B – General Assistance Grant
Application Checklist

(All items should be packaged in the order listed)

	Included	Not Included
1. This Application Checklist	<input type="checkbox"/>	<input type="checkbox"/>
2. Appendix I – The Application	<input type="checkbox"/>	<input type="checkbox"/>
3. Signed True and Correct Statement in Appendix I – The Application (signature MUST be original)	<input type="checkbox"/>	<input type="checkbox"/>
4. Résumés of the Principal Participants	<input type="checkbox"/>	<input type="checkbox"/>
5. Financial Documentation as per Section IV. H of the RFA document*	<input type="checkbox"/>	<input type="checkbox"/>
6. IRS Tax determination letter regarding non-profit status*	<input type="checkbox"/>	<input type="checkbox"/>
7. Current federal or state indirect negotiated cost plan, if applicable	<input type="checkbox"/>	<input type="checkbox"/>
8. A copy of current professional liability insurance and/or malpractice insurance policy, if applicable*	<input type="checkbox"/>	<input type="checkbox"/>

* Counties and Municipalities are not required to submit