

Name of Organization: _____

Project # 2011A-

AIDS Prevention Community Investment Program 2011/2012

Application Checklist

Please include a completed checklist with your application.

- | | | |
|---------|---|--------------------------|
| Part A: | Organizational Overview (3 copies)
1 copy must have original signature | <input type="checkbox"/> |
| Part B: | Project Application Form (3 copies total)
1 copy must have original signature | <input type="checkbox"/> |
| | Most recent audited financial statement (2 copies)
(Dated 2009 or 2010) | <input type="checkbox"/> |
| | Completed Declaration of Non-Discrimination form
must have original signature | <input type="checkbox"/> |
| | Letters patent/sponsorship (if not submitted previously,
or if any changes were
made since last application). | <input type="checkbox"/> |
| | Maximum of <u>3</u> letters of support for your project (one copy each) | <input type="checkbox"/> |
| | New applicant | <input type="checkbox"/> |