



Community Impact Grant Application

All applications must be submitted by August 25, 2019 at 11:59 PM. Please complete this form, scan it, and email it to OneAZFoundation@oneazcu.com. Mailed applications will not be accepted. All fields are mandatory and applications missing information will not be eligible for consideration.

For more information, contact OneAZFoundation@oneazcu.com.

Organization Name: _____

Organization EIN: _____

Amount Requested (\$1,000 – \$3,000 Max): _____

Organization Street Address: _____

City: _____ State: _____ Zip Code: _____

Contact Person: _____

Title: _____

Phone Number: _____

Email: _____

Please list the OneAZ Credit Union branch you are affiliated with: _____

How will this grant help your organization positively impact the community? (Max 500 words)

As part of the application process, please submit a summary of how this grant will help your organization (Max 500 words). Include your organization name in your summary and email it with your application to OneAZFoundation@oneazcu.com.