

# CSCF Community Investment Program Application

The Cherokee Strip Community Foundation welcomes proposals from nonprofit organizations that benefit residents of Cimarron and Texas Counties of Northwest Oklahoma. We consider funding for special projects, innovative programs, technology, and capacity building.

The deadline for submission is by 5:00pm on November 29th, 2023. Incomplete or late applications will not be reviewed.

Final decisions will be notified by the end of December and funds disbursed by December 31st.

Please contact [grants@cherokeestripcf.com](mailto:grants@cherokeestripcf.com) or 580-234-3988 for any questions.

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## Verify eligibility: \*

- We have an IRS 501c3 determination letter on file
- We are affiliated with a tax-exempt organization or governmental unit

## Nonprofit Name: \*

## Nonprofit's Mailing Address: \*

Street Address

Address Line 2

City

State / Province / Region

Postal / Zip Code

Country

## Nonprofit's Highest Ranking Official (name & title):

## Primary Grant Contact \*

First

Last

## Grant Contact's Title \*

## Grant Contact's Email \*

## Phone Number \*

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**Nonprofit's Employer Identification Number (EIN): \***

**A brief history of your nonprofit organization and description of programs:  
(max 250 words) \***

Maximum of 250 words. *Currently Used: 0 words.*

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### **Tell Us About Your Project**

**Project Name \***

**Amount requested from CSCF: \***

\$  .   
Dollars Cents

**Total cost of project: \***

\$  .   
Dollars Cents

**Are others providing you funding on this project as well? If so, who and how much? \***

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### **Proposal Narrative**

The proposal narrative is the most important part of your grant proposal.

**Brief description of specific purpose for which grant funds are requested  
(max 250 words): \***

Enter 15 to 250 words. *Currently Used: 0 words.*

**Location of the project (including what cities or nearest cities, population served, geographic area and how many will benefit): \***

Maximum of 150 words. *Currently Used: 0 words.*

**Expected period of time in which funds will be spent: \***

**If grant is not received or partially funded, will it continue? How will you evaluate outcomes? \***

Maximum of 200 words. *Currently Used: 0 words.*

**Upload a detailed project budget specific to this grant. \***

No file chosen

Upload your IRS determination letter for nonprofit verification. \*

No file chosen

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