

## Emergency Food and Shelter Supplemental Application

Agency's Legal Name:	
Director/President/CEO	
Agency Contact (Name, Phone, Email) for Application	
Agency Contact (Name, Phone, Email) for EFSP if funded	
Agency Physical Address	
Agency Mailing Address	
Agency Main Phone:	
Agency Fax	
Agency Email (if different from above)	
Agency Web Site	
Agency Federal Employer Identification Number (FEIN)	
Amount of EFSP Funding requested for	
Served Meals	\$
Other Food	\$
Mass Shelter	\$
Other Shelter	\$
Supplies/Equipment	\$
Repairs/Code	\$
Rent/Mortgage Assistance	\$
Utility Assistance	\$
Total Amount Requested	\$
Agency Operating Budget (total)	
Agency budget for the program areas requested:	
Served Meals	\$
Other Food	\$
Mass Shelter	\$
Other Shelter	\$
Supplies/Equipment	\$
Repairs/Code	\$
Rent/Mortgage Assistance	\$
Utility Assistance	\$
Total Amount Budgeted	\$
Justification (e.g., increase in requests for assistance from unemployed persons; number not able to serve for lack of funding)	
Provide a copy of your most recent annual audit	
Is your agency:	<input type="checkbox"/> Nonprofit – <i>Provide Proof of Status &amp; Board Roster</i> <input type="checkbox"/> Unit of Local Government
Is your agency debarred or suspended from receiving funds or doing business with the Federal Government?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Three copies of the application must be received no later than 4:30 pm, Tuesday, May 12, 2009 at the United Way of Greater Chattanooga, 630 Market Street, Chattanooga, TN 37402.