ATTACHMENTS

Review My Application

APPLICATION

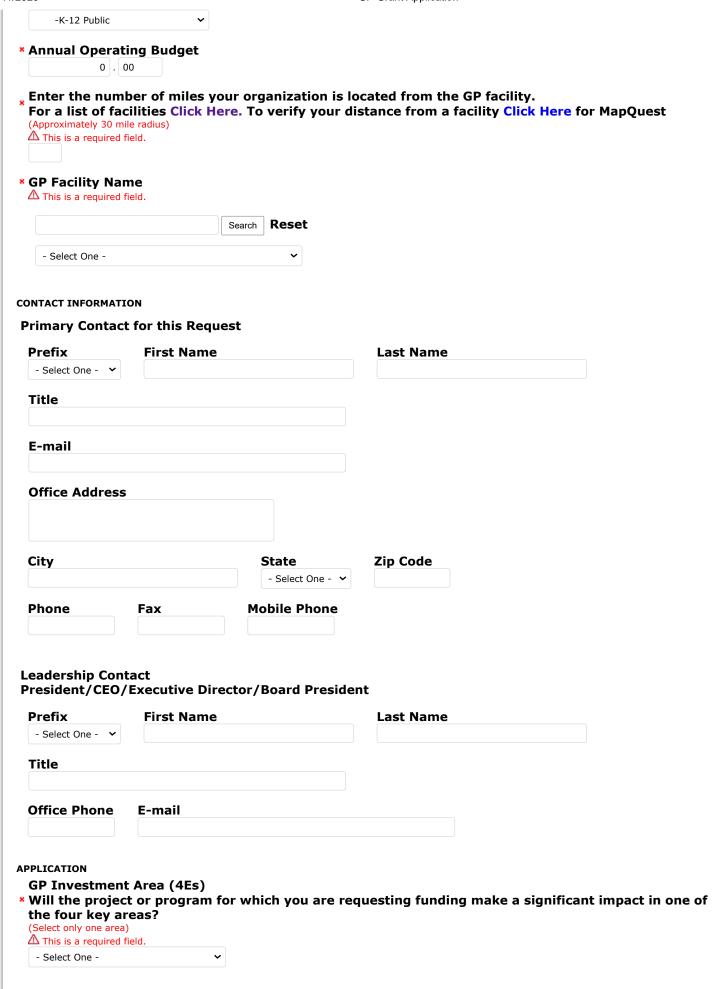


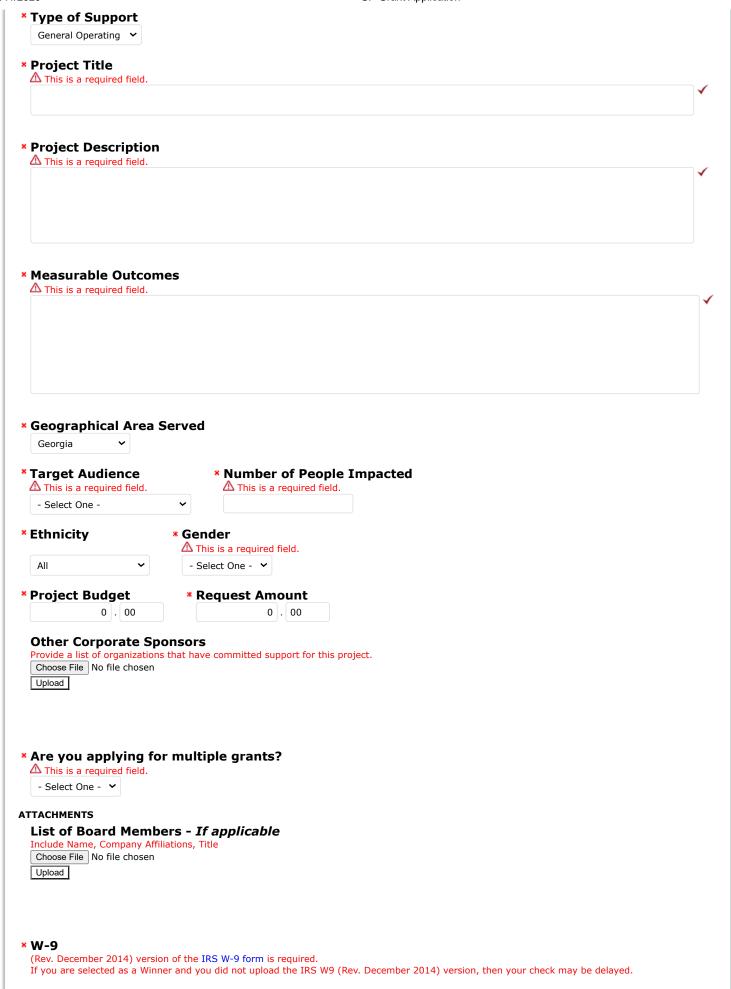
CONTACT INFORMATION

ORGANIZATION INFORMATION

Exit

Please correct the problems indicated below. · Address is a required field. City is a required field. State is a required field. Zip Code is a required field. • Organization Overview is a required field. Enter the number of miles your organization is located from the GP facility. For a list of facilities Click Here. To verify your distance from a facility Click Here for MapQuest is a required field. · GP Facility Name is a required field. GP Investment Area (4Es) Will the project or program for which you are requesting funding make a significant impact in one of the four key areas? is a required · Project Title is a required field. Project Description is a required field. Measurable Outcomes is a required field. Target Audience is a required field. Number of People Impacted is a required field. • Gender is a required field. Are you applying for multiple grants? is a required field. W-9 is a required field. • IRS 990 Page 1, IRS 990N, or Georgia-Pacific Government Entity Confirmation Form is a required field. • Are you part of a national organization? is a required field. You can review the information you've provided so far and make necessary modifications here. If you're satisfied with the contents of the application, click Submit to forward your application for consideration. If you're not ready to submit your application yet, click Save & Finish Later. ORGANIZATION INFORMATION Printer Friendly Version \parallel E-mail Draft Required before final submission * Organization Name Globe Academy Inc * Address Δ This is a required field. * City State ***** Zip Code Δ This is a required field. ⚠ This is a required field. \triangle This is a required field. - Select One - 🕶 Website * Federal Tax ID Number 27-1366277 * Organization Overview Brief description of organization's mission and history This is a required field. * Organization Type





Choose file first, then select Upload

This is a required field.
Choose File
No file chosen
Upload

* IRS 990 Page 1, IRS 990N, or Georgia-Pacific Government Entity Confirmation Form

You must attach one of the following:

- If your non-profit organization is required to file an IRS 990, you must upload IRS 990 Page 1.
- If your non-profit organization is NOT required to file an IRS 990, you must upload IRS 990N.
- If your organization is operating under a local, state or federal government entity, you must complete and upload the GP Government Entity Confirmation Form.

This is a required field.

Choose File No file chosen

Upload

* Are you part of a national organization?

Example: Chapter or affiliate operating under a national organization's Federal Tax ID Δ This is a required field.

- Select One - 🕶

If you are part of a national organization, complete and upload the Georgia-Pacific Nonprofit Affiliate Confirmation Form:

Click Here for the GP Nonprofit Affiliate Confirmation Form

Choose File No file chosen
Upload

IRS 990 Schedule A Page 1

If your non-profit organization is required to file an IRS 990, you must upload IRS 990 Schedule A Page 1.

Choose File No file chosen

Upload

IRS Tax Determination Letter, if applicable

Choose File No file chosen
Upload

Save & Finish Later Update