



EQUITY & DIVERSITY COMMISSION
REQUEST FOR FINANCIAL ASSISTANCE*

***Requests should be submitted no later than 60 days prior to the date needed.**

Applicant/Contact Information

Applicant Name: _____ Today's Date: _____
(Applying Organization or Individual)

Address: _____
Street Address *Suite #*

_____ _____
City *State* *ZIP Code*

Contact Person: _____

Title: _____ Phone: () _____

Funding Request

Amount Requested: \$ _____ Date Needed*: _____
***No later than 60 days prior**

Describe, in detail, how these funds will be utilized. Attach additional sheets as needed:

How does your request for funding align with the 2009-10 Equity & Diversity Program Goals?

Reinvestment Commitment

The Equity & Diversity Commission is committed to the reinvestment of services. If you receive funding from the Commission how do you prefer to reinvest your time and/or services to the Commission? *(check all that apply)*

- Volunteer to provide translation services. *Please list languages:*
- Attend monthly Commission meetings for *(insert number)* _____ months.
- Perform *(insert number)* _____ hours of community service by volunteering to *(please describe):*
- Other, please describe:

Thank you for your commitment to 2009-10 Equity and Diversity Program Goals.

Return completed forms to:
City of Tukwila
Equity & Diversity Commission
6200 Southcenter Boulevard
Tukwila, Washington 98188



Equity & Diversity Commission
2009 – 2010 PROGRAM GOALS

- *Link agencies and residents to cultural resources in the community.*
- *Support Foster High School's Multicultural Action Committee with their cultural programs and training.*