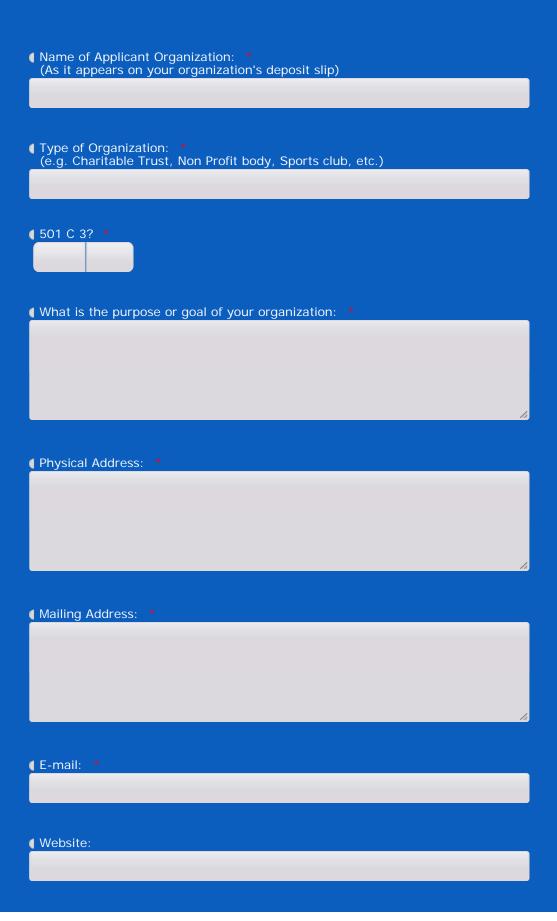
## Nonprofit Grant Request Form



Contact Person: *
Phone Number: *
■ What connection do you have with a Delta pilot?
what connection do you have with a Delta phot?
■ Delta pilot's name:
Will your charity benefit a Delta hub or a Delta community?
If so please indicate the appropriate hub.
■ All donations must be used for children in need 18 years of age and younger.
Will This requirement be met with your request? *
■ Has this organization ever applied for a grant from the Delta Pilots Charitable
Fund? Eligibility is limited to once every three years. *
If yes, when?
• Was this organization approved for a great from the Polta Pilote Charitable
Was this organization approved for a grant from the Delta Pilots Charitable Fund in the past? *
◀ If yes, when?
If yes, How much?
40 10 10
Current Amount Requested \$ *

•	Specifically what is the money requested to be used for? *(Please explain in detail)
	Is
	If you do not have enough space please attach a letter or any documentation that you feel will be helpful. You must specify in detail what the money will be used for.
•	Is there a deadline you are trying to meet?
	Is there a deadline you are trying to meet?
	Is there a deadline you are trying to meet?
	What percentage of money received is used for contributions, gifts and grants?

- Please e-mail this form to dpcf@alpa.org, attach the following documentation if applicable:
  \* Board Members
  \* Audited Financials
  \* Key Staff
  \* Any information that will help us understand the mission and goals of your organization.