



OCOTILLO WIND TRIBAL MITIGATION PROGRAM GRANT APPLICATION FORM

APPLICANT / ELIGIBLE TRIBE APPLYING FOR GRANT

Eligible Tribe Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Person: _____ Title: _____

Phone: _____ Email: _____

APPLYING FOR GRANT FROM *(select the appropriate box)*

- Ocotillo Wind Cultural Preservation Fund for the Barona Band of Diegueno Indians
- Ocotillo Wind Cultural Preservation Fund for the Cocopah Indian Tribe
- Ocotillo Wind Cultural Preservation Fund for the Ewiiapaayp Band of Kumeyaay Indians
- Ocotillo Wind Cultural Preservation Fund for the Fort Yuma Quechan Indian Tribe
- Ocotillo Wind Cultural Preservation Fund for the Torres-Martinez Desert Cahuilla Indians

CHARITABLE PURPOSE *(select one or as many activities that apply to this particular request)*

- Tribal Monitor Training
- Curation Management and Conservation Training
- Tribal Annual Gathering
- College Scholarships
- Linguistics Programs
- Outreach Programs
- Ethnography Studies

AMOUNT REQUESTED *(limited to available funds)*

\$ _____

PROJECT DESCRIPTION *(provide a brief description for how the funds will be used)*

CERTIFICATION, RELEASE & AGREEMENT

On behalf of the Eligible Tribe shown above:

I certify that neither I, nor any individual, will receive any material benefit as a result of this grant other than as a member of the Eligible Tribe receiving the benefits as a whole. If any material personal benefit or privilege is offered in connection with this grant request, I have not and will not accept it. I attest and affirm that I am a duly authorized representative to act and submit this request for the above specified charitable purpose(s), as agreed to and on behalf of my Eligible Tribe.

I fully understand and acknowledge that if awarded, this grant must directly and fully support the purpose(s) for which it was applied. This request is not intended to and will not:

- Fulfill a legally binding pledge or other financial obligation to the Eligible Tribe
- Benefit myself, any specific individual, or an entity in which I hold 35% or more controlling interest
- Support political campaigns or lobbying activities
- Pay for memberships, event tickets (i.e. galas, sporting events), goods bought at auction, religious benefits, etc.

I agree to submit a grant report to the Imperial Valley Community Foundation within sixty (60) of expending the grant award. I understand that this information will be shared with Ocotillo Express LLC, and may be included in IVCF's annual report and/or other publications and releases.

I understand that this grant request is subject to the review and approval of the Imperial Valley Community Foundation, and that the Board of IVCF may as part of their due diligence request additional information from me and/or the Eligible Tribe to demonstrate transparency and the appropriate management and treatment of grant funds.

I hereby release and agree to hold harmless Ocotillo Express LLC, its affiliates and agents from any claim, liability or obligation arising from or in connection with (i) IVCF's performance of its obligations under the Master Fund Agreement and (ii) any facilities, projects, programs, events or individuals funded by or benefitting from any of the distributions made from the Fund.

Authorized Signature: _____

Printed Name: _____

Title: _____

Date: _____

Phone: _____

INSTRUCTIONS

Send this completed form to the Imperial Valley Community Foundation by any of the following methods:

Mail Imperial Valley Community Foundation
PO Box 2739
El Centro, CA 92244

Email bobby@ivcommunityfoundation.org (Bobby Brock, IVCF President/CEO)

For questions regarding your grant application, please call the Foundation office at (760) 336-0055.