Impact and Community Grant Program

Collaborator and Partner Agreement

Grant Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Program Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Collaborators** share resources and take joint responsibility for managing and carrying out the proposed program. Organizations collaborating to carry out an Impact Grant must sign below, indicating their organization’s agreement to collaborate.

**Partners** in a proposed program agree to work with the grant applicant by allowing the applicant access to the partner’s site or clients. For example, a grant applicant who plans to provide food to seniors may ask another organization to let the grant applicant distribute food to the partner’s clients at the client’s site. Or a grant applicant who plans to provide services at a school must get approval from the appropriate school personnel. Organizations agreeing to partner with a grant applicant must sign below, indicating their organization’s agreement to being a partner.

As described in the grant proposal submitted to Impact100 on the date above:

* \_\_\_\_\_\_\_(*applying organization name here*)\_\_\_\_\_\_\_\_ has met with and intends to work with the organization listed below as a partner OR collaborator.
* \_\_\_\_\_\_\_(*partnering/collaborating organization name here*)\_\_\_\_\_\_\_\_ has met with and intends to work with theabove named grant applicant as a:

*Please indicate role with an x:* Program Collaborator

Program Partner

*The signature below indicates that the collaborator/partner organization understands and agrees to support the grant applicant’s proposed program named above as well as the role of the organization in the proposed program.*

Organization Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ED/CEO Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Please complete and save as a PDF and submit with your application.*