Date: Click or tap here to enter text.

Organization Name: Click or tap here to enter text.

Address: Click or tap here to enter text.

Website (if there is one): Click or tap here to enter text.

Is the organization exempt under IRS Code Section 501(c)(3)? Yes [ ]  No [ ]

*To be eligible for this program, the majority of both executive leadership (Board members and CEO/ED) and senior staff must identify as being persons of color.*

Leadership Staff: (Add more lines as needed.)

Name Title Race

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Board of Directors: (Add more lines as needed.)

Name Race

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Organization’s mission and vision:

Click or tap here to enter text.

Brief description of what your organization does:

Click or tap here to enter text.

Brief description of the community you serve, including geographic locations and languages spoken:

Click or tap here to enter text.

What challenges with trauma and toxic stress among young children (0-8 years old) and families have been identified in your community?

Click or tap here to enter text.

How is your organization working to address these challenges?

Click or tap here to enter text.

How will your organization benefit by participating in this project?

Click or tap here to enter text.

What makes your organization a good fit for this project?

Click or tap here to enter text.

Please provide any additional information you would like to share about your participation in this opportunity.

Click or tap here to enter text.