



Caddo-Bossier Parishes Port Commission Sponsorship Application

1 Date: _____
Organization requesting assistance: _____
Organization address: _____
Contact person: _____ Title: _____
Phone: _____ Fax: _____
E-mail address: _____
Organization mission: _____

2 Name of event, program or project: _____
Date(s) of event program or project: _____

3 Is your organization classified as a tax-exempt under section 501c(3) or 170c of the United State Internal Revenue Code, or a public agency?
_____ Non-profit _____ Public Agency _____ Neither
Organization's tax ID#: _____

4 Dollar amount or items requested: _____

5 Please provide a brief description of how The Commission's resources will be used. Attach additional pages if needed.

6 Which of the following targeted areas does the program support?
_____ Workforce development _____ Economic Investment

7 Are there opportunities to include The Commission and its employees as volunteers in this program?
_____ Yes, opportunities exist. _____ No, project does not lend itself to volunteerism.

8 How will The Commission be recognized as a sponsor/participant?

9
Representative's signature Representative's printed name
Title Date of signature

Port of Caddo Bossier Use Only:

Approved: _____ Date: _____ Initials: _____