



**COMMUNITY PARTNERSHIP PROGRAM  
CONTRIBUTION REQUEST FORM**

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**DEADLINE FOR RECEIPT OF APPLICATIONS IS SEPTEMBER 16, 2024**

Please include the following in your application:

NAME OF ORGANIZATION OR AGENCY:

MAILING ADDRESS (*include city and zip code*):

CONTACT PERSON:

PHONE AND EMAIL ADDRESS:

PURPOSE OF ORGANIZATION OR AGENCY:

A DESCRIPTION OF YOUR PROPOSAL AND HOW IT WILL ADDRESS THE PRIORITIES LISTED BELOW:

GEOGRAPHIC AREA AND COMMUNITIES THAT WILL PARTICIPATE IN THE PROGRAM:

NUMBER OF PEOPLE WHO BENEFIT FROM THE PROGRAM:

AMOUNT OF CONTRIBUTION YOU ARE REQUESTING:

OTHER SOURCES OF FUNDING APPLIED FOR OR RECEIVED FOR THIS PROJECT:

Awards: Individual awards are typically in the range of \$1,000 to \$7,500.

Priorities: Priority will be given to programs or projects that address health and wellness in Western Alaska communities. These priorities are, in order of importance, as follows:

- Increasing the awareness and availability of healthy foods
- Addressing critical social needs in the community
- Number of people helped by the project/cause
- Extent to which the proposed project can be used as a pilot project for other communities in the region
- Special consideration will be given to programs or projects targeting youth and elderly populations within the community

Attach to this form any supplemental materials that you feel will provide information about your organization or event.

Applications or questions about the program should be sent to: Ms. Kim Lynch, American Seafoods Company, 2025 1<sup>st</sup> Avenue, Suite 900, Seattle, WA 98121, [kim.lynch@americanseafoods.com](mailto:kim.lynch@americanseafoods.com), Fax = 206-448-0202, Phone = 206-256-2659