



**Community Outreach and Opportunity Programs**  
 8929 S. Sepulveda Blvd., Suite 400  
 Los Angeles, California 90045  
 Phone: (310) 649-1016, Fax: (310) 649-1034

**Fiscal Sponsorship Expedited Application**

Dear Colleague,

Thank you for your interest in becoming a CO-OP Sponsored Project. CO-OP is always excited to assist in bringing forth innovative and worthwhile projects to support the communities we serve. By implementing your project, you are helping further the CO-OP mission. Please complete the form below and attach any additional documentation that may enhance your request for support.

|                            |  |       |  |          |  |
|----------------------------|--|-------|--|----------|--|
| <b>Project Name</b>        |  |       |  |          |  |
| <b>Project Information</b> |  |       |  |          |  |
| Primary Contact            |  |       |  |          |  |
| Title                      |  |       |  |          |  |
| Address                    |  |       |  |          |  |
| City                       |  | State |  | Zip Code |  |
| Office Phone               |  | Cell  |  |          |  |
| E-mail                     |  |       |  |          |  |
| Website URL                |  |       |  |          |  |

|   |
|---|
| <b>Brief Description of Your Project</b><br>(leadership, history, budget, mission, services/activities, goals/objectives, board/committees) |
|   |

|  |
|--|
| <b>Brief Description of Your Fiscal Sponsor Ship Needs:</b><br>(areas of support, specific grant application, timeline, budgetary concerns, fundraising) |
|  |

|           |  |      |  |
|-----------|--|------|--|
| Signature |  | Date |  |
|-----------|--|------|--|