

Martin Luther King Jr. State Commission

Request for Funding Proposal

All requests should align with the mission of Martin Luther King Jr. State Commission which is to promote Martin Luther King Jr.'s philosophy on human rights, equality, nonviolence, social change, and unity/interconnectedness to the people of New Mexico through remembrance, celebration, and celebration and action.

AWARDS

All awards are contingent upon appropriations and funding availability. All information submitted will be reviewed by the Martin Luther King, Jr. Commission Board to establish funding. **The maximum amount of approved awards may not exceed \$3,000**. If there is a desire for increased funding for program delivery, contractual service agreements would need to be discussed with the Executive Director.

Please Note:

- **Incomplete proposals will not be considered.
- **Due to state procurement codes, all funding is processed on a reimbursement basis ONLY.
- **Funding will not cover food or travel expenses.
- **Request for funding must be turned in for review at least two months in advance of event date.
- *Check One

?] Program or event supports one or more	of the Martin Luther	King Jr. Comi	mission
focus areas: (*Circle All That Apply)			
☐ Advocacy and Policy			
☐ Educational Advancement			
□ Economic Empowerment			
☐ Health Care			
□ Community Development			
□ Social Justice			
Date of Event:	Today's Dat	e:	
Name of Organization/Program:			
Address:	City:	State: NM	Zip:
Contact Name:	Phone Number:		

Amount Requested from Martin Luther King Jr. Commission

*Please Type or Print responses to the following on separate paper and submit with this Proposal.

ORGANIZATION AND MISSION

Give a brief history of your organization or program. mission, organization/program goals, program/ event curriculum structure, and which New Mexico communities are impacted.

PUBLICITY

***The Martin Luther King Jr. State Commission must be listed as a sponsor on all marketing material in order to receive funding.

COMMUNITY NEED

Define the area what impact will your program have on the community, and what is the expected outcomes.

PROGRAM/EVENT OBJECTIVES

Name who, what, when, where, and how the funding will assist your organization's impact on achieving program/event objectives.

GOODS AND SERVICES

CERTIFICATION

List goods or services to be reimbursed with funding support from the Martin Luther King Jr. State Commission. Note: Funding may <u>not</u> be reimbursed for certain categories (i.e., food, travel, and salaries). Only validated itemized receipts <u>must</u> be submitted for reimbursement – no written receipts will be accepted in lieu of originals. <u>All Invoices must be submitted no later than TWO</u> (2) weeks after the conclusion of your event.

Total Cost of Program/Eve	nt:	
<u>VERIFICATION</u>		
Have you ever received fur	nding from MLK Commission or any o	other State Agency? Yes/No _
Vendor #	or attach a State-Substitute W-9 or Fed	deral W-9

I certify that all information submitted in proposal is complete and is a true representation of all program/event services, objectives, outcomes, budget, and purpose of funding support.

I also authorize the Martin Luther King Jr. State Commission to utilize program information for public record, including but not limited to publicizing and reporting.

I further understand that all awards are given on a reimbursement basis (after all duties have been performed or completed) and are subject to eligibility of approval (information in proposal must be complete and concise). All funding awards are contingent based on available appropriations.

Signature:	Date:	_				
Printed Name:						
Return completed Proposal Information to:						
Attn: Leonard Waites/ or Beverly Jord New Mexico Office of Martin Luther 310 San Pedro Dr. NE Suite 210 Albuquerque, NM 87108 Email: leonard.waites@state.nm.us Phone: (505) 222-6467						
Agency Use Only						
This Funding Request for \$	has been approved in the amount of \$					
Executive Director						