



**GRANT APPLICATION  
"REQUEST FOR ASSISTANCE/ CONTRACT"  
DISCOVER ODESSA**

(Attach Additional Sheets If Necessary)

**A. ORGANIZATION IDENTITY:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Person (if different): \_\_\_\_\_

Contact Information: _____	Title	
Telephone #	Cell#	e-mail address

ALTERNATE: \_\_\_\_\_

Name/Title

\_\_\_\_\_

Name/Title

**B. ORGANIZATION OVERVIEW:**

1. Brief history and description of the organization/event:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Primary purpose and programs:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Geographic area and age group served by the organization/event:

\_\_\_\_\_  
\_\_\_\_\_

(Attach Additional Sheets If Necessary)

**C. NATURE OF THE REQUEST:**

1. Amount requested: \$ \_\_\_\_\_

2. Date/s of the Event: \_\_\_\_\_

3. Description of Event: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Description of group served by this event: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Work plan or timeline for project: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Evaluation plan to determine room nights, etc.: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Plan for on-going funding of the project: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Attach Additional Sheets If Necessary)

**D. FINANCIAL INFORMATION:**

1. Event Budget:

Income Sources & Amounts: \$ \_\_\_\_\_

(Include grants from other sources, and/or pending grants)

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2. Expenses: (detail all advertising cost):\$ \_\_\_\_\_

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3. Project Net Income/Loss: \$ \_\_\_\_\_

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4. Sources and amounts of all other income: \$ \_\_\_\_\_

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5. Anticipated number of out of town guest. \_\_\_\_\_

Anticipated number of hotel room nights: \_\_\_\_\_

Name of hotel/hotels: \_\_\_\_\_

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6. Has your organization applied for Hotel/Motel tax revenues through the City of Odessa for this event? If yes, your organization can not apply for funding from the Odessa CVB: YES \_\_\_\_\_ NO \_\_\_\_\_

This application has the approval of the requesting organizations Board of Directors (If applicable).

\_\_\_\_\_  
Authorized Signature/Title

\_\_\_\_\_  
Date

### CONTRACT

DISCOVER - Odessa Has approved the \_\_\_\_\_  
Name of Applicant

to receive a grant in the amount of \$ \_\_\_\_\_ subject to the terms of this

"Request for Assistance/Contract".

\_\_\_\_\_  
Discover Odessa

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date