



International Grant Request Form

Please complete this form when requesting to send grant funding to a United Charitable approved NGO. If it has not, please submit United Charitable [International Grant Approval Form](#) before submitting this application. If there have been any changes in the international charity's leadership, registration status, or charitable purpose, any previously approved charity must resubmit an updated International Charity Approval Form for approval. Please make sure that you have read our [Charitable Gift Recommendation Policy](#) on our website and can comply with all of our policies before submitting your request to send for funding.

DAF or FSP Name: _____ Account #: _____

Proposed International Charity Information	Processing and Delivery (Optional)
Name: _____	Processing*: <input type="checkbox"/> Expedited (1 -2 business days)
Address: _____	Delivery*: <input type="checkbox"/> FedEx (Overnight) <input type="checkbox"/> Priority Mail <input type="checkbox"/> Wire <input type="checkbox"/> Regular Mail
Requested Charitable Grant Amount: \$ _____	Send Check to: <input type="checkbox"/> Payee
Check Memo: _____	<input type="checkbox"/> Other Address: _____
Office Use Only - Party ID: _____	*Requests will be reviewed within 3-5 business days. Expedited processing is only an option if the international charity has previously been approved for grant funding. Additional fees may apply.

How do you know of this charity's work? _____

How does this further the purpose of your DAF or FSP? _____

Have you visited this international charity and seen their work first hand? Yes No If so, when? _____

If not, do you have any plans to visit? Yes No If so, when? _____

What relationship do you have with this charity? Do you have a business, personal or familial relationship with this NGO? _____

Any other information that you would like for us to consider? _____

Fund Manager (DAF) / Program Manager (FSP) Attestation

"I certify that the international charitable payee above does not have any donor advisory privileges as to my program or the investments thereof. I further certify that the above international charity or leadership does not provide any funding to my program. I certify all donated funds will be used in accordance with United Charitable's Charitable Gift Recommendation Policy and that the international charity will provide in English a full accounting of fund use and charitable activities and achievements via the quarterly Grant Usage Report as necessary. The United Charitable Board reserves the right for final approval of any charitable gift."

Program/Fund Manager Name: _____ Signature: _____

Email: _____ Phone: _____ Date: _____

Initial Review: <input type="checkbox"/> International Charity <input type="checkbox"/> Religious	Entered By: _____ Date: _____ Invoice ID: _____
Registered By: _____	Approved & Posted NS: _____ Date: _____
Registration Docs on file: <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Fees entered on log/Amount correct/Program correct/Two approvals
International Grant Application Received: <input type="checkbox"/> Yes <input type="checkbox"/> No	Fees: \$ _____ Expedited Processing \$ _____ Other \$ _____
Cash Bal \$ _____ Cash in Transit \$ _____ Lg Don Ltr <input type="checkbox"/> Yes <input type="checkbox"/> No	\$ _____ Priority \$ _____ FedEx \$ _____ Wire Transfer
<input type="checkbox"/> Tasked/Cash sufficient/Back up docs complete/Char status confirmed/Usage approved	Controller Review: _____
2nd Authorization: _____ Date: _____	<input type="checkbox"/> Check Issued <input type="checkbox"/> 1099 matches Initials: _____ Ck/Wire Date: _____
<input type="checkbox"/> Charitable status confirmed/Usage approved/Disbursement of funds approved	