



# NORTH AMERICAN TELUGU ASSOCIATION

(Non Profit Organization) Tax I.D. 27-1119753

5 Independence Way, Suite #300, Princeton, NJ 08540

Email: [info@nataus.org](mailto:info@nataus.org) Website: [www.nataus.org](http://www.nataus.org)

## NATA PROJECT SPONSORSHIP FORM

Date Received		Date Approved	
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Please read the instructions on the back carefully before you complete this form. Make check payable to "NATA" and mail the check along with this application form to the above address.

Sponsor/s		SS#(Tax ID)	
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Name/s		Phone	
Name/s		Phone	

Address / Apt. #		
City / State / Zip		

Email		Fax	
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Beneficiary Organization	
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Is It Registered: Yes / No		Is It Non-Profit: Yes / No	
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Coordinator's Name in India		Phone No.	
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India Address	
City / State / Zip	

### PROJECT DESCRIPTION

• Stand Alone Solar Street Lighting System in Villages	\$	
• Solar Lighting System in Temples	\$	
• Desk Top Computers in Elementary Schools	\$	
• Toilets in Elementary Schools	\$	
• Safe Drinking Water Plants in Villages	\$	
• Sewing Machines to Women enrolled in DWACRA	\$	
• NATA Seva Days	\$	
• Continuing Education Programs	\$	
• Business Seminars	\$	
• Health Camps in USA/India	\$	
• School Building/Health Care Centers	\$	
• Adopt a Village Program	\$	
• Cultural Programs in USA/India	\$	
• Others (Describe)	\$	
• Others (Describe)	\$	
<b>TOTAL AMOUNT (US Dollars)</b>	<b>\$</b>	

Name of the Village		Approximate Population Served	
Community benefits from the proposed projects/s:			

Project Expense	\$
Beneficiary Contribution	\$
Sponsor's Contribution	\$

**INSTRUCTIONS:**

**Of the total money donated by me, I understand 2.5% will be utilized towards the charitable projects initiated by NATA.**

As sponsoring donor of funds, do you have any or intend to exercise any control or influence on the recipient organization and its implementation of the proposed community projects?

**Yes / No**

What proposal do you have to ensure NATA that the proposed project will be completed as planned by the recipient organization? Include any of your prior experience with the organization in carrying out other special programs, if any. As a sponsor who is familiar with the recipient organization and its members, can you assure NATA that the beneficiary organization will submit quarterly progress report and financial report and the final report with in three months of the completion of the project?

**Yes / No**

Upon completion of this project, are you and the beneficiary organization willing to acknowledge the NATA permanently on a plaque or in another suitable way for its help with the completion of the project?

**Yes / No**

I/We am/are convinced that the beneficiary organization has the ability, experience and total commitment for the success of the project. I/We hereby declare that I/We have no personal benefit from this project. I/We are confident that the funds being contributed by me/us will be utilized for the stipulated use by the recipient organization.

I/We understand that I/We am/are responsible for submitting to the NATA the quarterly reports of work in the progress including photographs and of spending of funds. I/We understand that the tax-deductibility of my/our contributions may be in jeopardy if the funds are used for purposes other than the stipulated use by the recipient. Unless otherwise specifically approved by the NATA Foundation Committee, total sponsor's contribution towards a project shall not exceed \$ 50,000. Contributions exceeding \$50,000 may be approved, only after reviewing the progress reports.

Sponsor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Sponsor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

<b>Office Use Only</b>		
Date Form Received	Payment / Date Received	Approved By
	\$ /	

**Notes, If any.**