

# Global Volunteer Action Fund U.S. Application Form



As an active volunteer\* and American Express employee, you may apply for a cash grant to a charitable nonprofit organization to which you volunteer your time. The Global Volunteer Action Fund (GVAF) recognizes employees' commitment of time, energy and skills with a grant from the American Express Foundation. By participating in GVAF, you also help the Foundation identify organizations that are improving the quality of life in communities around the world.

## HOW TO APPLY

**Step One:** Employee/P1 Advisor complete **Section A** of the application form. **Step Two:** Send the application to the nonprofit organization you are endorsing for them to complete **Section B** of the application form and submit the required documentation, as outlined in Section B. **Step Three:** Employee/P1 Advisor mail the original application along with the additional required documents to the address below. Please do not include any supplemental attachments such as photos, articles, brochures, etc.

American Express Foundation  
GVAF Program  
200 Vesey Street, WFC  
New York, NY 10285-4804

To be considered, your application must be postmarked no later than **September 5**; otherwise, your request will be declined. **GVAF grants will be awarded on a rolling basis throughout the year as applications are received and evaluated. The Foundation will not accept application forms from prior years so please ensure that you are submitting the most current form.**

## EMPLOYEE ELIGIBILITY GUIDELINES\*\*

Employee/P1 Advisor applicants must:

- Be regular full-time or part-time employees (20 hrs/week) of American Express or one of its wholly-owned subsidiaries. P2 advisors are not eligible for this program.
- Have worked for the Company for at least six months and have carried out volunteer service while employed by the Company.
- Have volunteered for a minimum of 25 hours over the course of at least six consecutive months.
- Have volunteered their service within the 12 months prior to the date of submission of this application.

## NONPROFIT ELIGIBILITY GUIDELINES

Nonprofit applicants must:

- Be certified as tax-exempt by the U.S. Internal Revenue Service under Section 501(c)(3) and 509 (a)(1,2, or 3) of the Internal Revenue Service Code. If the organization operates under the auspices of a different institution, you must submit a letter on the letterhead of the parent institution explaining their fiscal responsibility as well as a copy of their IRS tax-exempt letter (additional information may be required).
- Be charitable, civic, health, social welfare, educational, cultural or community organizations or projects that provide a public service and for which you volunteer. Government organizations (such as schools) and religious organizations that operate non-sectarian charitable programs (program serves all people regardless of religious beliefs or association) may be eligible.

Ineligible organizations include:

- Political or fraternal groups.
- Organizations that benefit specific individuals or their families.
- Organizations that discriminate on the basis of race, color or religion.
- Religious organizations seeking funds for religious purposes.
- Private foundations.
- Organizations that fund terrorist groups or activities.

## GRANT AMOUNTS

Grants for individuals are **\$500** and for teams (two or more employee volunteers) **\$1,000**. **A volunteer may endorse a maximum of two grants for two different organizations during any calendar year.\*\*\***

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## FREQUENTLY ASKED QUESTIONS

### WHAT KINDS OF REQUESTS ARE FUNDED?

Requests to fund specific projects or activities are given priority. Examples of requests eligible for funding might include: buying phone equipment and a fax machine for a crisis hotline; purchasing kitchen equipment for a program to feed the homeless; underwriting the cost of training materials for volunteers in a charity to prevent child abuse; acquiring equipment to produce recorded cassette tapes or cds for the blind; providing educational materials for an after-school tutoring program, etc.

Projects **INELIGIBLE** for funding include: entrance fees and matching donations for walk-a-thons, bike-a-thons, etc; athletic team sponsorships; purchasing tickets for or underwriting fundraising events; in-kind travel, gifts or merchandise for auctions; scholarship programs; salaries for employees, interns and/or volunteer staff; endowment funds, capital campaigns, etc.

### WHAT HAPPENS AFTER I APPLY

Your application will first be reviewed for completeness upon receipt. If your application is received incomplete, you will be notified and must complete the application by the September 5 deadline. Otherwise, your application will be declined and you will need to reapply the following year. For complete applications, the GVAF committee will review your submission and notify you of the final decision within **60 days** of receipt of your application. If your request is approved, you will receive written notification of your award. However, the check will be sent directly to the nonprofit organization along with correspondence informing them of the grant award supporting your volunteer efforts. If your request is declined, you will be notified and asked to inform the organization of the decision.

### How can I get more information?

Call the GVAF Hotline at:  
**(212) 640-0590, option 3**

or e-mail questions to:

**[global.volunteer.action.fund@aexp.com](mailto:global.volunteer.action.fund@aexp.com)**

*\*A volunteer is an employee who gives his or her time without charge to an organization. If you are making a personal cash contribution to a non-profit and would like to apply for a company match, please refer to the Gift Matching Program for eligibility and application guidelines.*

*\*\*This program is meant to encourage and support personal volunteer activities by employees, as differentiated from pure business development work. It is important to make this distinction because of Internal Revenue Service regulations.*

*\*\*\*An eligible organization may receive multiple individual and team grants. The total grant amount awarded for any one organization will not exceed \$5,000 per year.*

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## To Be Completed By Employee

PLEASE TYPE OR PRINT CLEARLY AND LEGIBLY

Please check:  Individual Application  Team Application (Two or more volunteers)

*For Individual applicants:* Complete Section A and questions 1 through 7. The charitable nonprofit organization should complete section B. The application must be signed by both the employee(s) and authorized organization officer. If there is more than one individual application for the same charitable nonprofit organization and for the same project, then they will be compiled and treated as a team application.

*For Team applications:* The project team leader must complete Section A, including questions 1 to 7. Each team member must also complete Section A, including questions 1 to 7. All team member applications must be submitted together. **The nonprofit organization should complete section B for all applicants.** The application must be signed by both the employee(s) and authorized organization officer.

If a team application, name of project team leader: \_\_\_\_\_

**Only applications with original signatures will be accepted. Do not send photocopies or faxes of signatures.**

### Employee Volunteer Information:

Last Name: \_\_\_\_\_  
First Name: \_\_\_\_\_  
Hire Date: \_\_\_\_\_  
Employee ID: \_\_\_\_\_  
Work Phone Number: \_\_\_\_\_  
Work Fax Number: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_  
Job Title: \_\_\_\_\_  
Business Unit: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_  
Zip Code: \_\_\_\_\_ Mail Code: \_\_\_\_\_

### Name of Charitable Nonprofit or Other Qualifying Organization:

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

Organization EIN# \_\_\_\_\_  
*(If you are having difficulty locating the organization's EIN/Tax ID number, please contact the organization or look it up on the Guidestar ([www.guidestar.org](http://www.guidestar.org)) website)*

Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_  
Zip Code: \_\_\_\_\_

### Employee Manager's Information:

Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Work Phone Number: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_  
Zip Code: \_\_\_\_\_ Mail Code: \_\_\_\_\_

Contact Name: \_\_\_\_\_  
*(Must be a person other than employee applicant – e.g., President/CEO, Executive Director, Director of Development)*

Title: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Fax Number: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_  
Web Address: \_\_\_\_\_

### For each question please use only the space provided below:

1. How long have you volunteered for this organization? \_\_\_\_\_ years/ \_\_\_\_\_ months, from \_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_  
*(minimum of 6 consecutive months) (mm/yy) (mm/yy)*

2. How many hours per month? (average) \_\_\_\_\_ hours

3. What is the mission statement of the organization?

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

4. Describe the community need(s) being addressed by the organization.

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

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**For each question please use only the space provided below:**

5. Describe the population benefiting from or being served by its work.

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6. You are requesting funds for (*check one*):

Specific Project (*describe the project*) or  General Support (*describe the nonprofit's activities*)

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7. I certify that the contribution I am requesting does not represent in any way tuition, nor is it payment in exchange for or in expectation of some monetary or other benefit to be given to me, or to any person or organization named by me. In addition, such contribution will not be used for religious or political purposes, or to fulfill a religious or political commitment. Furthermore, I certify that to the best of my knowledge this nonprofit, its staff and its programs conform to the eligibility guidelines of the American Express Global Volunteer Action Fund program and do not in any way fund or assist terrorist groups or activities.

Employee Volunteer Signature

Date

# B

**To Be Completed By Charitable Nonprofit Organization  
PLEASE TYPE OR PRINT CLEARLY IN BLACK INK**

Legal Name of Organization: \_\_\_\_\_ EIN# \_\_\_\_\_

Name Of Authorized Officer: \_\_\_\_\_ Title: \_\_\_\_\_

**Please attach a copy of the IRS tax-exempt letter as defined in section 501(c)(3) and 509(a)(1,2, and 3).**

If you are under the auspices of a different organization, please submit a letter on the letterhead of that organization explaining their fiscal responsibility as well as a copy of their IRS tax-exempt status letter (additional information may be required).

### Certification

I certify that the following information is true:

- All information and documentation provided for this application is complete and accurate to the best of my knowledge.
- This organization complies with the eligibility guidelines of the American Express Global Volunteer Action Fund program and adheres to accepted financial and record-keeping practices and will furnish upon request an annual report, financial statements or a list of subcontractors and affiliates.
- The applicant submitting this application form is/was involved in volunteer activities with our organization for the time period indicated in Section A/Question 1 of this form.
- Funds granted by the American Express Foundation will be used for purposes described in this application and funds will go towards charitable purposes for which we are organized and for which we currently operate.
- The requested contribution does not represent in any way tuition or payment in exchange for, or in expectation of, monetary or other benefits to be given to the donor.
- The grant will not be used for religious or political purposes, nor to fulfill a religious or political commitment.
- We do not discriminate on the basis of race, religion, creed, national origin, disability, handicap, age, sex, marital status, veteran status or any other basis prohibited by law.
- This organization takes reasonable steps to ensure that grant funds or resources are not ultimately distributed to terrorist organizations or used to support terrorist or violent activities.
- This organization also takes reasonable steps to ensure that staff, board, and other volunteers have no dealings whatsoever with known terrorists or terrorist organizations.

Signature of Authorized Officer

Date