



## Organization Details

**ORGANIZATION TYPE**       Non-profit       Charity       School       Other

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**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_

**Website:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_ **Tax ID/EIN:** \_\_\_\_\_

## MAIN CONTACT PERSON

**Name:** \_\_\_\_\_ **Title/Position:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

## Request Details

Please select which NXT Community Giving Pillar your request relates most directly to:

- STEAM Education** (hands-on science, technology, engineering, arts, and mathematics learning opportunities for young people)
- Green Energy Innovation** (support for efficient, creative climate solutions and innovations that can directly apply to and enhance efficiencies of NXT processes)
- Environmental Stewardship** (support to enhance the ecosystems and environment local to NXT facilities)

**TYPE OF SUPPORT**       Volunteerism       Financial       Both

If financial support is requested:

**Amount Requested:** \_\_\_\_\_ **Purpose of Funds:** (program funding, event sponsorship, infrastructure development) \_\_\_\_\_

If volunteer support is requested:

**Numbers of Volunteers Needed:** \_\_\_\_\_ **Duration/Date(s):** \_\_\_\_\_

**Description of Volunteer Work:** (e.g., event support, mentoring, cleanup activities) \_\_\_\_\_

**Is this a sponsorship request?**       Yes       No

If yes, please attach those details. (Sponsorship options, donation levels, impact, etc)

## BRANDING SUPPORT/OPPORTUNITIES

- Social Media** (shout-outs, boosted posts, event sharing, etc)
- Event Branding** (event banners, promotional tables, etc)
- Other** (Please describe) \_\_\_\_\_

## Project/Initiative Details

**Project/Initiative Name:**

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**Project Start Date:**

**Project End Date:**

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**Brief Description:** (Provide a brief project/initiative overview — 2-3 sentences max)

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### GOALS/OBJECTIVES

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### IMPACT ON THE COMMUNITY

(How will this benefit the local community? Describe your target demographic, and what you think the project will do to support them)

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## Additional Information

### PRIOR SUPPORT

Have you received support from NXTClean Fuels in the past?  Yes  No

If yes, please provide details. **Years:**

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**Type of Support:** (Financial, Volunteer, Both)

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**Outcome/Impact:** (Briefly describe the impact of the past support)

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**ATTACHMENTS** (Please attach any supporting documents like brochures, project plans, letters of support, etc.)

### ADDITIONAL COMMENTS OR NOTES

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## Agreement

I hereby declare that the information provided in this application is accurate to the best of my knowledge. I understand that submission of this application does not guarantee support from NXTClean Fuels.

**Signature:**

**Date:**

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**On Behalf Of:** (Organization)

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### INTERNAL USE ONLY

**Application Received Date:**

**Amount Approved (\$):** (If applicable)

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**Reviewed By:**

**Number of Volunteers Approved:** (If applicable)

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**Status:** (Approved/Declined/Pending Further Information)

**Notification Sent Date:**

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