



### AmeriCorps Partnership Form

#### 1. Partner Organization

Partner Organization Name:

Contact First Name:

Contact Last Name:

Contact Title:

What type of support does this partner provide to the program?:

If 'Financial Support' is selected, what type of match is this partner contributing?:

Source of Financial Support?:

Amount of match contribution?:  (Numbers Only)

Is this a Private or Public Organization?:

#### 2. Partner Organization Type

- CNCS-AMC National Direct
- CNCS-Foster Grandparent
- CNCS-LSA - Higher Ed
- CNCS-Retired Senior Volunteer Program
- CNCS-VISTA
- Education (K-12)-Elementary School
- Education (K-12)-Middle School
- Education (K-12)-School District
- Higher Education-CSU
- Higher Education-Independent College
- Media Organization-Local Print
- Media Organization-Local TV
- Media Organization-National Radio
- Media Organization-State Print
- Non-Profit Organization-Direct Service Provider
- Non-Profit Organization-Local Conservation Corps
- Non-Profit Organization-Policy and Advocacy
- Other
- Private Sector-Corporate Volunteer Program
- Private Sector-Private Sector Association
- Public Sector-Elected Official
- Public Sector-State Agency
- CNCS-CalServe Program
- CNCS-LSA - CBO
- CNCS-NCCC
- CNCS-Senior Companion
- Education (K-12)-County Office of Education
- Education (K-12)-High School
- Education (K-12)-School Association
- Higher Education-Community College
- Higher Education-Higher Ed Association
- Higher Education-UC
- Media Organization-Local Radio
- Media Organization-National Print
- Media Organization-National TV
- Non-Profit Organization-Civic Organization
- Non-Profit Organization-Faith Based Organization
- Non-Profit Organization-Non-Profit Association
- Non-Profit Organization-Volunteer Center
- Private Sector-Business Donations
- Private Sector-Foundations
- Public Sector-County Agency
- Public Sector-Local Agency

Other: