

Cooperative 
Credit Union Association

Creating Cooperative Power

COVID-19 Grant Application

Name of Credit Union: _____

Address: _____

Main Contact: _____

Title: _____

Email Address: _____

Telephone Number: _____

Date Submitted: _____

Grant Amount Requested (maximum \$500): _____

Please provide a brief description of how this grant will be used:

Please email completed form to
Member.Relations@ccua.org

Internal use only: _____

Approved by: _____

Dated: _____

Funds distributed: _____