



Appendix 2

Application Checklist

Applicants will be required to submit the documents and forms listed below. The documents must be submitted as an email attachment in the final application submission. **All documents must be submitted as individual PDFs and appropriately titled according to the document's content. Submit documents to: immigrantintegration.initiatives@gobiz.ca.gov.**

Use the following checklist to ensure that all documents and forms necessary to respond to this Request for Proposal (RFP) have been included.

<input type="checkbox"/>	Application Checklist (this page)
<input type="checkbox"/>	Complete and sign the Request for Proposal Application. (Exhibit A) Document Title: LIIG FY 2023-24 RFP- (Local Jurisdiction Name)
<input type="checkbox"/>	Project Budget (Exhibit B) Complete and submit the Project Budget. The project budget must be saved and submitted as a .xls file. All formulas must be used appropriately throughout the Excel document. Document Title: Project Budget- (Local Jurisdiction Name)
<input type="checkbox"/>	Government Agency Taxpayer ID Complete and submit the Government Agency Taxpayer ID. Document Title: Government Agency Taxpayer ID-(Local Jurisdiction Name)
<input type="checkbox"/>	STD 21 Drug-Free Workplace Certification Complete and sign the STD.21 Drug-Free Workplace Certification. Document Title: STD.21- (Local Jurisdiction Name)



Application Checklist

Required Subgrantee Documents

The applicant must submit the documents listed below on behalf of the subgrantee. The documents must be submitted as an email attachment in the final application submission. **All documents must be submitted as individual PDFs and appropriately titled according to the document's content. Submit documents to: immigrantintegration.initiatives@gobiz.ca.gov**

<input type="checkbox"/>	<p>Proof of 501 (c)(3) or 501(C)(5) Status Submit proof of "active" 501(c)(3) or 501(c)(5) status from the Internal Revenue Service. To access and download proof of active status, visit the Internal Revenue Service website at the following link: https://apps.irs.gov/app/eos/ Document Title: (Local Jurisdiction Name and Nonprofit Name)</p>
<input type="checkbox"/>	<p>Proof of "Active" Legal Business Status from the California Secretary of State To access and download proof of active status, visit the California Secretary of State's website at the following link: https://bizfileonline.sos.ca.gov/search/business. Document Title: 501 (c)(3) or 501(C)(5) Status- (Local Jurisdiction Name and Nonprofit Name)</p>
<input type="checkbox"/>	<p>Proof of "Current" Charity Status with the California Department of Justice. To access and download proof of status, visit the California Department of Justice website at the following link: http://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y Document Title: California Department of Justice - (Local Jurisdiction Name and Nonprofit Name)</p>
<input type="checkbox"/>	<p>Insurance Certificate Each applicant must submit proof of current coverage that meets GO-Biz's insurance requirements upon execution of the grant agreement. Document Title: Insurance Certificate- (Local Jurisdiction Name and Nonprofit Name)</p>