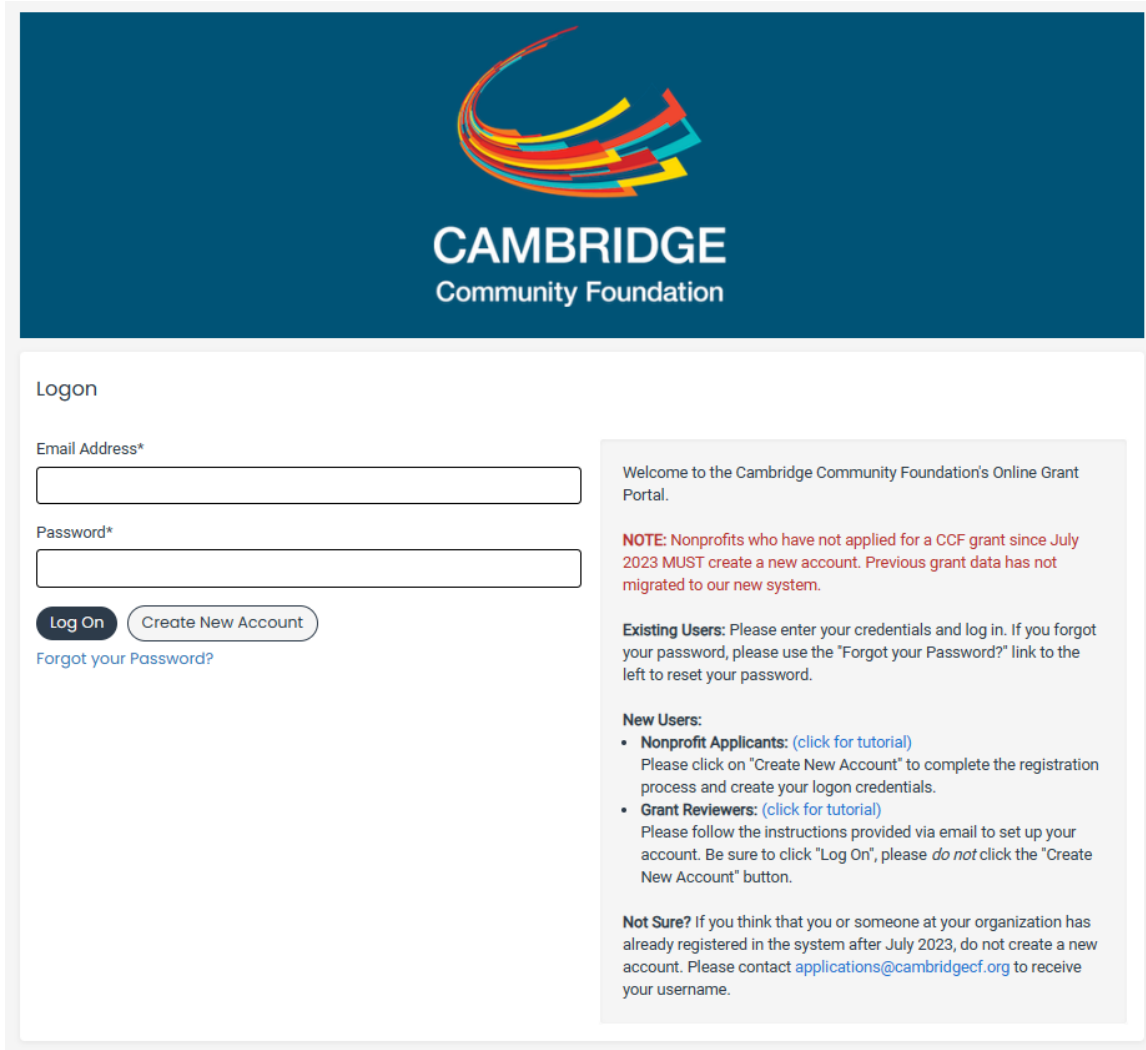


Register as a group/organization applicant

Please follow the steps below to ensure that your group/organization account is successfully registered in the grant portal.

1. Navigate to the grant portal:
<https://www.grantinterface.com/Home/Logon?urlkey=cambridge>
2. Click “Create New Account”



CAMBRIDGE
Community Foundation

Logon

Email Address*

Password*

[Log On](#) [Create New Account](#)

[Forgot your Password?](#)

Welcome to the Cambridge Community Foundation's Online Grant Portal.

NOTE: Nonprofits who have not applied for a CCF grant since July 2023 MUST create a new account. Previous grant data has not migrated to our new system.

Existing Users: Please enter your credentials and log in. If you forgot your password, please use the "Forgot your Password?" link to the left to reset your password.

New Users:

- **Nonprofit Applicants:** [\(click for tutorial\)](#)
Please click on "Create New Account" to complete the registration process and create your logon credentials.
- **Grant Reviewers:** [\(click for tutorial\)](#)
Please follow the instructions provided via email to set up your account. Be sure to click "Log On", please *do not* click the "Create New Account" button.

Not Sure? If you think that you or someone at your organization has already registered in the system after July 2023, do not create a new account. Please contact applications@cambridgecf.org to receive your username.

3. Organization Information

Organization Information

Organization Name* <input type="text"/>	EIN / Tax ID (##-#####)* <small>Please enter your organization's EIN number, even if you are using a fiscal sponsor. If you do not have an EIN number, enter 00-0000000.</small> <input type="text"/>
Are you using a fiscal sponsor?* <input type="radio"/> Yes <input type="radio"/> No	Web Site <input type="text"/>
Telephone Number (###-###-#### x###)* <input type="text"/>	Organization Email <input type="text"/>
Address 1* <input type="text"/>	Address 2 <input type="text"/>
City* <input type="text"/>	State* <input type="text"/>
Postal Code* <input type="text"/>	Country <input type="text"/>
Mission Statement* <input type="text"/> <small>5,000 characters left of 5,000</small>	

[Next >](#)

- a. **Organization Name:** Enter your group/organization's name
- b. **EIN / Tax ID:**
Nonprofit applicants: Enter your EIN
Fiscally sponsored applicants: Enter "00-0000000"
Other applicants: Enter "00-0000000"
- c. **Are you using a fiscal sponsor?:** Select "Yes" if your group/organization will use a fiscal sponsor to accept funds. If your group/organization does not have a fiscal sponsor, select "No"
- d. **Web Site:** Enter your group/organization's website, if applicable
- e. **Telephone Number:** Enter your group/organization's primary phone number
- f. **Organization Email:** Enter your group/organization's primary email, if applicable
- g. **Address:** Enter your group/organization's address
- h. **Mission Statement:** Enter your group/organization's mission statement. If you do not have a mission statement, enter "n/a"
- i. Select "Next"

4. User Information

User Information

Prefix (Mr, Mrs, Ms, Mx, etc.)	First Name*
<input type="text"/>	<input type="text"/>
Last Name*	Suffix (Sr, Jr, III, etc.)
<input type="text"/>	<input type="text"/>
Organization Role*	Email / Username*
<input type="text"/>	<input type="text"/>
Email / Username Confirmation*	Telephone Number (###-###-#### x###)*
<input type="text"/>	<input type="text"/>
Mobile Number (###-###-####)	Address 1*
<input type="text"/>	<input type="text"/>
Address 2	City*
<input type="text"/>	<input type="text"/>
State*	Postal Code*
<input type="text"/>	<input type="text"/>
Country	
<input type="text"/>	

- Prefix:** Enter if applicable
- First Name:** Enter your first name
- Last Name:** Enter your last name
- Suffix:** Enter if applicable
- Organization Role:** Enter your role in the group/organization. If you do not have an established role, enter “n/a”
- Email/Username:** Enter your email
- Telephone Number:** Enter your primary phone number
- Mobile Number:** Enter if applicable
- Address:** If your address is the same as the group/organization address, select “Copy Address from Organization” at the top of this section. Enter your address if it differs from the group/organization address.
- Select “Next”

5. Executive Officer Question

Executive Officer Question

Are you the Organization's Executive Officer?*

Yes
 No

- Are you the Organization's Executive Officer?:** If your organization has an executive officer that is not you, select “No” otherwise, select “yes”
- Select “Next”

6. Additional Executive Officer Information

Additional Executive Officer Information

Prefix (Mr, Mrs, Ms, Mx, etc.)	Suffix (Sr, Jr, III, etc.)
<input type="text"/>	<input type="text"/>
Mobile Number (###-###-####)	Address 2
<input type="text"/>	<input type="text"/>
Country	
<input type="text"/>	

[← Previous](#) [Next →](#)

- Enter Executive Officer name and information (if applicable)
- Select “Next”

7. Password

Password

Passwords must be at least six characters long and may contain capital or lowercase letters, numbers, or any of the following special characters: !@#\$%^&*()_.

Password*	Confirm Password*
<input type="text"/>	<input type="text"/>

[← Previous](#) [Create Account](#)

- Enter and confirm your password
- Select “Create Account”

8. Your account is now activated