2021 Grant Application

Organizational Profile

Date of application: _____

Organization name: _____

Year founded: _____

Employer Identification Number: _____

Street address/city/state/zip: _____

Executive Director: _____ Phone: _____ email: _____
(Or equivalent, please state title)

Development Director: _____ Phone: _____ email: _____
(Or equivalent, please state title)

Please indicate the primary contact for this grant application: _____

Website: _____

Describe the mission of your organization: _____

_____

_____

Please note: If you are a national organization, all information on this form, including the financial information on page 4, should be for the Indiana chapter/program

Number of full-time employees: 2020 _____ 2019 _____

Number of people served: 2020 _____ 2019 _____

Signature and Title of responsible Officer of your organization: _____

PLEASE LIMIT YOUR RESPONSE TO QUESTIONS BELOW TO A MAXIMUM OF 5 PAGES (MINIMUM FONT 12)

1. What is the <u>purpose</u> of this grant proposal and what <u>dollar amount</u> is requested?

2. What is the current <u>impact</u> of your program, what <u>needs</u> would be met with this request and how would your impact <u>increase</u>?

3. List <u>timeframe</u> of your proposal:

4. What are the expected <u>outcomes</u> and how will they be measured?

5. What are your plans for <u>long-term funding</u> of this project? Include your plan for financial <u>sustainability</u>.

6. What impact has COVID-19 had on your organization, programs, overall health and sustainability; and what changes have been made as a result?

Financial Information

- Specific amount requested: _____

- Annual budget: _____

- Request is _____% of your annual organization budget

- List other sources of funding applicable to the proposal. List each source and amount requested. Indicate if the status of the funding is pending, committed or received and for what year:

  Source: _____Amount:_____ Status: _____Year: _____

  Source: _____Amount:_____ Status: _____Year: _____

  Source: _____Amount:_____ Status: _____Year: _____

- Percentage of Board Members who contribute financially to your organization _____%
  Total Board Contributions: $_____

- Number of full Board meetings last year: _____
  Average % of Board members in attendance at those meetings_____%

- List the organization's top three salaries, including benefits.

  Position: _____   Salary: _____   Benefits: _____

  Position: _____   Salary: _____   Benefits: _____

  Position: _____   Salary: _____   Benefits: _____

- Does your organization have an endowment? _____
  What is its worth? _____

- List amount and nature of all outstanding debt as of application date: _____

  ➤ Attach current organizational budget

  ➤ Attach actual budget from last year

  ➤ Attach project budget, if applicable

  ➤ Attach current list of board of trustees and their occupation