

Community Grant Program - General Operating Support

Community Foundation of Elmira-Corning and the Finger Lakes

GENERAL OPERATING SUPPORT DATA INTAKE

General Operating Support Eligibility Requirements*

- The project takes place in Chemung, and/or Southeastern Steuben counties within New York State.
- Qualify as one of the following entities eligible for application:
 - Nonprofit or community organization holding a current **tax-exempt status under Section 501(c)(3)** of the Internal Revenue Code
 - Public Library serving cities, towns, and villages
- You are not a municipality, school district, or higher education institution

I have read and understood the eligibility requirements.

Choices

Yes

Organization Name*

Character Limit: 100

Amount Requested*

Character Limit: 20

Target Population*

Character Limit: 100

Choices

- 0-5
- Adults
- Animals
- Food Insecure
- Frail/Elderly
- General Community
- Homeless
- Low-Income
- Parents
- People w/ Disabilities - children and/or adult
- School - Age
- Teens

Target Audience*

Briefly describe your target audience and any special populations served.

Character Limit: 10000

Focus Area*

This is the primary focus area of your organization.

Choices

- Animal Welfare
- Arts
- Capacity Building
- Civic Affairs
- Culture
- Economic Development
- Education
- Environment
- Health/Wellness
- Human Services
- Out-of-School Time
- Racial Equity
- Racial Justice
- Recreation
- Youth

Geographic Area*

Southeastern Steuben County is defined as the greater Corning area including the towns of Addison, Campbell, and Savona.

Choices

- Both
- Chemung County
- Southeastern Steuben County

Number of People Served*

Please provide us with the unduplicated number of people served annually (do not use a comma separator).

Character Limit: 250

Tracking the Number of People Served*

Briefly describe the mechanism(s) by which people served by your organization are tracked.

Character Limit: 5000

Total Number of Full-Time Equivalent Employees*

Character Limit: 250

GENERAL OPERATING SUPPORT NARRATIVE

I. ABOUT THE ORGANIZATION

History, Mission and Current Programs*

Briefly describe the organization's history, mission, goals, purpose, and current programs.

Character Limit: 10000

Board Governance*

Briefly describe your organization's leadership (board and staff), governance, by-laws, and procedures. (This can be answered in 2-3 paragraphs.)

Character Limit: 10000

Community Involvement*

Briefly describe how the population you serve is involved in the work of your organization.

Character Limit: 10000

II. GENERAL OPERATING SUPPORT FUNDING REQUEST

Please answer the following questions that will describe your general operating need(s).

Objective of the General Operating Support Grant*

State challenges to be addressed and describe the size and/or severity of the challenge or need that will be supported by the general operating support grant.

Character Limit: 10000

Strategies to Address Challenges*

Describe any short and long-term strategies for addressing the identified organizational challenges.

Character Limit: 10000

Challenges due to COVID-19*

Describe how COVID-19 has continued to challenge your organization to fulfill its mission. If your organization has not been impacted by COVID-19, type N/A.

Character Limit: 10000

Impact of a General Operating Support Grant*

If awarded a general operating support grant, what measurable impact will it have on organizational and programmatic capacity?

Character Limit: 5000

Sustainability*

How will you use a general operating support grant to help you position your organization towards greater financial, programmatic, and operational sustainability?

Character Limit: 10000

Success*

How will your organization know that it has been successful? **Please limit outcomes to your organization's top 2 or 3.**

Character Limit: 10000

SUPPORTING DOCUMENTS

File Uploads:

If you have multiple files please combine them into one document (copy, paste into one word document), save as a PDF and then upload into the application.

Board of Directors*

Please upload the names of current board of directors and their occupations.

File Size Limit: 1 MB

Mission Statement, Equal Employment Opportunity and Policy Statement on Nondiscrimination*

File Size Limit: 1 MB

Strategic Plan*

Please upload your organization's most recent strategic or business plan.

File Size Limit: 5 MB

Organization Operating Budget*

Please upload a copy of your organization's most recent operating budget. The budget should include all expenses and revenue for the organization. (Excel, Word or PDF)

File Size Limit: 5 MB

Endowments

If your organization has an endowment, briefly describe its purpose and whether it's restricted/unrestricted.

Character Limit: 5000

DIVERSITY, EQUITY & INCLUSION INFORMATION

In order to continue the Community Foundation's mission to improve the quality of life for all residents of the Finger Lakes region, it is critical that we address the inequities and injustices within our organization and through our work in communities. The Community Foundation is committed to diversity, equity and inclusion and we see an ongoing need to gather information

and invite conversation with our grantees.

Please assist us by providing the information requested below to the best of your ability.

Diversity, Equity & inclusion Within Your Organization*

Briefly describe how your organization strives to promote diversity, equity and inclusion within your programs, staff, board, or volunteers, and how this reflects the community you serve. (This can be answered in 2-3 paragraphs.)

Character Limit: 10000

Does your organization have an approach to creating an inclusive workplace?*

An **inclusive workplace** is one where people with all kinds of differences and disabilities feel welcome and valued for their contributions

Choices

No
Yes

If yes, briefly describe it here.

Character Limit: 5000

Does your organization currently collect demographic data for board and/or staff?*

Choices

No
Yes

What categories of demographic data does your organization collect?

Choices

Age
Gender
Physical Abilities
Race/Ethnicity
Religion
Sexual Orientation

Thank you for submitting an application to the Community Foundation.

CF Staff Internal

Eligibility*

Choices

1 full-time paid employee

501(c)(3) Checked

Applied for a CF Grant within the last five years

Chemung and/or SE Steuben Counties;

Five-year operating history

Follow-ups complete

Operating expenses greater than \$50,000