Model Application Template

Community Foundation of Northeast Iowa Grants

Application Basics

Project Name*
Character Limit: 100

Project Summary*
Provide a brief summary of the project.

Character Limit: 350

Program Area*
Select the option that best fits this project. See this document for a description of each Program Area.

Choices
Art and Culture
Community Betterment
Education
Environment
Health
Historic Preservation
Human Service

Funding Request Type*
Choices
Capital
Equipment/Materials
Operations
Programming

Staff Comments
Character Limit: 2000

Organization Information

Fiscal Sponsorship*
Is the organization applying for this grant applying on behalf of another organization or group?

Choices
Yes
No

Sponsored Organization's Information

If you answered "Yes" to the above question, provide the name of the sponsored organization or group.

Character Limit: 100

Organization Type*

Note: After submitting this application, you may be contacted to provide additional documentation to demonstrate proof of tax exempt status.

Choices

Public Charity [501(c)(3)]
Government Entity
Other Tax Exempt Organization

Purpose of Organization*

Describe the purpose of your organization. Include your organization's mission and vision statement(s), if developed.

Character Limit: 1000

Board of Directors/Governing Body*

Upload a list of your Board of Directors or Governing Committee. List should include names, roles, terms, and professional affiliations. **Use only Word, Excel, or .pdf files**. (See the "Other Details" section here for support on uploading files.)

File Size Limit: 2 MB

Total Annual Agency Budget*

Provide your total annual agency budget figure. If you're a government entity, provide only your annual department budget figure.

Character Limit: 20

Project Details

Project Description*

Provide a complete description of the project. Include any community partnerships related to this project.

Character Limit: 2000

Project Start Date*

Character Limit: 10

Project End Date*

Character Limit: 10

Expected Outcomes and Measurements*

What are the expected outcomes? Describe *outcomes* (impact, results, etc.), NOT *outputs* (activities, services, materials, etc.). Describe any tools, methods, and/or strategies that you will use to measure outcomes.

Character Limit: 2000

Project Contact*

Who is the primary contact for this project? List the following:

Name
Organization/Department
Phone Number
Email Address

Character Limit: 200

Community Impact

While this project may benefit people from outside _____ county (for example, a museum that attracts people from out of the area, or an agency that serves multiple counties), please limit the following responses to the impact your project will have on the citizens of _____ county.

Community Need*

What community need does this project address? What data exists to support this need? Provide specific data that demonstrates the community need.

Character Limit: 2000

People Being Served*

Who will **directly** benefit from this project? Indicate the age, race/ethnicity, socioeconomic status, and/or the specific area/region/neighborhood that is being served.

Character Limit: 1000

Youth Being Served*

How many youth (ages 0-18) will **directly** benefit from this project?

Character Limit: 6

Adults Being Served*

How many adults will **directly** benefit from this project?

Character Limit: 6

Financial Information

Total Project Amount*

Character Limit: 20

Amount Requested*

Character Limit: 20

Budget Narrative*

Describe in detail how grant money would be spent for this project.

Character Limit: 750

Project Budget*

Attach a detailed project budget, which includes all sources of income and expenses for this project. Include in-kind gifts/services, other grant requests, etc. Indicate if other funding is pending, approved, or received. **Use only Word, Excel, or .pdf files**. (See the "Other Details" section here for support on uploading files.)

File Size Limit: 2 MB

Support Document

Support Document

OPTIONAL: If you have other information to support your application, compile it into one document and upload it here. **Use only Word, Excel, ,jpg or .pdf files**.
(See the "Other Details" section here for support on uploading files.)

File Size Limit: 2 MB

Authorized Signature

Important! By entering data into the next three (3) fields calling for insertion of your Name, Title, and Date, you are:
(1) representing that you are an officer or other agent for the Applicant duly authorized to enter into legally binding agreements on behalf of the Applicant
(2) agreeing to submit this grant application in an electronic form on behalf of the Applicant which shall be bound by its contents as an electronic transaction
(3) agreeing that you provided true, accurate, current and complete information
(4) agreeing that your insertion of data into these following fields constitutes an electronic signature.

Name (Authorized Representative)*

Character Limit: 150

Title.*
Character Limit: 50

Date:*
Character Limit: 10

Applicant Feedback

Our foundation is interested in improving our openness practices. The following questions seek feedback from applicants that will assist us in this process. We encourage you to be as honest as possible. No answers will affect your organization's chances of being awarded a grant through the County Community Foundation.

Application Completion*
How long did it take you to collect the information requested and complete this application?

Choices
Under 3 Hours
3 - 6 Hours
6 - 9 Hours
9 - 12 Hours
12+ Hours

Openness Priorities*
Choose the top three practices that would improve the openness effectiveness of our foundation.

Choices
Assist grantees with problem solving and learning after a grant is made
Meet with potential new applicants and organizations
Provide funding priorities and other criteria in grant guidelines
Provide specific feedback on application after grant decisions
Seek input on applications from grantees annually
Share information about how grant selections are made

Process Improvement*
What can we do to make our grant process easier for your organization? Mark all that apply.

Choices
Allow for general operating costs related to program
Ask about challenges of project
Clear statement of mission/funding priorities
Extend grant reporting periods
Include a minimum and maximum request limit
Include eligibility checklist in application
Provide larger grants
Provide more information about level of funding available

Provide more opportunity to ask questions
Share scoring criteria
Shorten application