



Grant Application

Before completing this and other Grant Applications, be sure to:

- Read all instructions thoroughly before beginning and complete all questions.
- Research and communicate with other funders – obtain a copy of funding guidelines, deadlines and/or annual report. Be aware of each funder’s preferred method of initial contact, and additional information required.
- Be strategic – make sure your goals, objectives, and amount requested match the criteria of the Foundation.

APPLICANT

1. **Name of Organization:**

2. **Tax I.D. Number:**

3. **Legal Name** (as the identified by IRS):
(if different than above)

4. **Address:**

5. **Phone:**

6. **Fax:**

7. **Website:**

8. **Executive Director:**

9. **Primary Contact:**
(Foundation contact will be addressed to this individual)

Title:

E-mail:

Phone:

Fax:

10. Current Board President:

N/A

11. Current Board Members:

N/A

12. Does your organization have an IRS nonprofit designation?

Yes

No

If no, name of fiscal agent:

13. Did your organization use Form 1023-EZ to obtain a 501(c)(3) Designation?

Yes *(If yes, provide a copy of Form 1023-EZ)*

No

14. Is your organization a government entity?

Yes

No

15. Select your organization's annual financial reporting method:

Fiscal Year:

Start Date:

End Date:

Calendar Year: *(January 1 – December 31)*

16. Total Organizational Operating Budget for one (1) year:

17. Other than the Wythe-Bland Foundation, list three of the largest funders for your operating budget in the last fiscal year and amount of funding.

1. Funder:	Amount funded:
2. Funder:	Amount funded:
3. Funder:	Amount funded:

18. State your organization's Mission Statement *(if none, state your **project's** mission):*

19. Is this request being submitted exclusively to the Wythe-Bland Foundation?

Yes

No *(If no, attach additional funding source(s) information)*

PROJECT INFORMATION

20. Project Title:

21. Summarize your proposal and how it fits with the Foundation's mission and grantmaking priorities while focusing on the community impact and document the number of Wythe and Bland County citizens that will be served:

22. Has the project been approved by the governing body of your organization?

Yes

No

23. Date of approval:

24. Total Project Budget:

25. Amount requested from the Wythe-Bland Foundation:

(Round to the nearest hundreds)

26. Amount of other project funding sources:

27. Percent of total project requested from the Wythe-Bland Foundation: %

**Note: If the project is approved and funds are awarded and other project funding sources are decreased, than the Wythe-Bland Foundation's funds will be decreased to provide the agreed upon funded percentage of project.*

28. Duration of grant requested project: Months

(Provide justification if project exceeds 12 months)

29. Project Starting Date:

30. Project Ending Date:

31. How would you request grant funding be advanced?

Normal funding advances are made 1/3 grant amount at execution of the Grant Agreement, 1/3 upon submission of the Wythe-Bland Foundation Funded Project Progress Report, and final payment at completion of project and submission and approval of the Wythe-Bland Project Evaluation and Final Report.

Normal Funding:

Other (Describe below):

If other method of funding advances is requested, please provide a justification:

FEASIBILITY REPORT

- 1. Existing Service.** Briefly describe what service you currently provide or how service is currently provided.
- 2. Proposed Project.** Describe the proposed project and provide a description of how Foundation grant funds will be used.
- 3. Need for the Project.** Indicate why the proposed project is needed and the community impact it will have. What conditions will be different from the date prior to grant award and once your project is complete?
- 4. Need for the Grant.** Identify why the Wythe-Bland Foundation grant is needed. (Provide evidence addressing items such as your organization's balance sheet, or other resources).
- 5. Sustainability.** Identify how this project is going to be sustained in the future.
- 6. Service Area.** Indicate what area the proposed project will serve and, if known, the population or number of individuals to be served.

PROJECT BUDGET

Part A: Project Cost Estimate

Construction.....	\$
Real Estate.....	\$
Administrative Costs.....	\$
Professional Fees.....	\$
Equipment Purchase.....	\$
Other (describe).....	\$
Total:	\$

Part B: Provide a breakdown in project related costs and itemize how requested Wythe-Bland Foundation funds will be used.

(This table or other format that contains similar information may be used and attached).

Proposed Project Cost	WBF Grant	Other Funds	Total

9. Other funding sources. List the sources and amount of funds that may be available other than from the Wythe-Bland Foundation, to fund part of the project.

(This table or other format that contains similar information may be used and attached).

Entity/Source	Amount of Funds

PROJECT CALENDAR

Month	<u>Explanation, if necessary</u> <i>(one sentence or less)</i>
October	
November	
December	
January	
February	
March	
April	
May	
June	
July	
August	
September	

Budget Form

Overview: An important component of your Grant Application is the preparation of a detailed project budget and budget narrative.

(This form or other format that contains similar information may be used).

Line-Item Budget Guidelines:

- The line-item budget should *include all income and expenses associated with the proposed project*. Please note that not every line-item applies to every project.
- Projected Operating Budget to be completed for three years beginning with the first year of grant award

Three (3) Year Projected Total Organizational Project Income and Expense Statement

Income	Year 1	Year 2	Year 3
Foundations	\$	\$	\$
Other Grants	\$	\$	\$
Earned Income	\$	\$	\$
Interest Income	\$	\$	\$
TOTAL REVENUE:	\$	\$	\$
Expenses	Year 1	Year 2	Year 3
Salary Wages and Benefits	\$	\$	\$
Insurance	\$	\$	\$
Professional Fees	\$	\$	\$
Equipment	\$	\$	\$
Supplies	\$	\$	\$
Debt Service	\$	\$	\$
Other Expenses	\$	\$	\$
TOTAL EXPENSES:	\$	\$	\$
NET INCOME:	\$	\$	\$

Project Outcome and Objectives

(Use the **SMART** approach for the creation of your measurable outcome and objectives.

SMART is an acronym that stands for Specific, Measurable, Achievable (or Attainable), Relevant (or Realistic), and Time-bound).

GRANT DATE:

AGENCY:

Outcome Objectives	Indicators/ Measures	Target/ Benchmark	Baseline	Conditions/ Limitations	Data Source/ Collection	Results & Comments
<i>Measurable result established for project</i>	<i>What is being measured</i>	<i>Degree of change expected</i>	<i>Starting point or standard</i>	<i>Criteria for inclusion; describe & define group or project</i>	<i>Where data will come from & how/when collected</i>	<i>Your results; brief comments on challenges/problems</i>
1.						
2.						
3.						
4.						
5. Compare the previous year results						

Previous Wythe-Bland Foundation Funding

Provide a list that includes grant cycle award date and purpose, of all previous funding received from Wythe-Bland Foundation

Date	Project	Amount of Funds
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$

**Include Total on next page.*

Previous Wythe-Bland Foundation Funding (continued-if needed)

Provide a list that includes grant cycle award date and purpose, of all previous funding received from Wythe-Bland Foundation

Date	Project	Amount of Funds
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
	TOTAL:	\$

Application Checklist

(Forms necessary for an application to be considered complete)

- Grant Application form
- IRS Nonprofit Designation Letter* *(N/A for government entities)*
- Certificate of Good Standing State Corporation Commission*
(N/A for government entities)
- Feasibility Report
- Letter of support from other partnering agencies in the project, or to which services will be provided.
- Itemization of Items to be Purchased with Grant Funds
- Budget Form
- Project Outcomes and Objectives
- Articles of Incorporation* *(N/A for government entities)*
- Bylaws* *(N/A for government entities)*
- Audits or Financial Statements from the Previous Year

**If your organization has previously submitted a copy to the Foundation, and they remain unchanged, no submission is necessary.*

CERTIFYING THE INFORMATION

We certify that the information contained in this Application and all forms, narrative, and any attachments submitted with it are true and correct to the best of our knowledge. We understand that any willful manipulation of information or data will result in immediate discontinuation of funding from the Wythe-Bland Foundation.

The Wythe-Bland Foundation requires that you certify your Application by submitting an electronic signature. This signature consists of typing your name at the "Enter Electronic Signature" line and checking the "Signature Box"; thus, certifying the information contained in the report is accurate.

Enter Electronic Signature:

*Signature Box

Date: