

Fund for Homeless Women 2023

Community Foundation for Monterey County

Grantwriting Tips and Instructions

The Fund for Homeless Women is a field of interest fund of the Community Foundation for Monterey County (CFMC). The purpose of the fund is to support programs and services for homeless women on the Monterey Peninsula, CA. The Fund for Homeless Women expects to grant \$170,000 this year.

Before submitting a grant application, please review the grant guidelines and familiarize yourself with our online grants manager.

Grants are expected to range from \$25,000 to \$50,000. Organizations are encouraged to:

1. Review the grant guidelines and application questions.
2. Prepare application documents (e.g., project budget, board list, etc.).
3. Submit completed grant application by **5:00 pm, October 6, 2023; earlier if possible.**

Funding decisions will be announced by early December. For questions, contact Janet Shing at janet@cfmco.org or 831.375.9712 x137.

Grantwriting Tips

1. Be clear and concise in your responses.
2. If you need to leave this form and return later, scroll to the bottom of the page and click "Save Application" before logging out.
3. Watch character count limits on the narrative response questions. The character counter is below each narrative box and the total count **INCLUDES SPACES**.
4. The character counts are maximum limits. You are not required to use all the space.
5. Have someone review your document to ensure clarity. If they have questions, so will our reviewers.
6. You may download a printer-friendly PDF of your application by clicking the "Application Packet" link at the top of this page.

File Upload Instructions:

For any question below that requires a document to be uploaded, please follow these steps.

1. Create or identify an existing document on your computer that addresses the request.
Include the name of your organization on all documents and in the name of each document

that you upload. USE WORD, EXCEL OR PDF FORMATS ONLY.

2. Return to the appropriate question of your online application. Click on the "upload a file" button. Locate the document on your computer. Click "Open".

3. Your file will begin uploading right away, and you may see a progress indicator. (Note: You no longer have to click "Save" at the bottom of the page to upload files.) When the upload is complete, the file's name will appear as a blue link under the corresponding "upload a file" button. We recommend that you click this link to check the file. The red "X" on the right allows you to delete the file you just uploaded (it does not indicate an error). **(Note file size limits for each document.)**

Grant Request

Program Name*

Provide a brief one-line phrase that best describes this request.

Example: *Housing navigation and emergency assistance*

Character Limit: 100

Requested Amount*

Use the format "25,000". Organizations may request emergency assistance up to \$10,000/year. Total requests for shelter/housing/case management services, including emergency assisted are accepted up to \$50,000/year total.

Character Limit: 20

Total Program Budget*

for the time period of this request

Character Limit: 20

Proposed Program and Evaluation Plan

If you are requesting funding under both priorities, emergency assistance and housing/supportive services, answer the following questions for all programs.

Community Need*

Describe how you know that the proposed services are needed. Cite evidence or data used to verify the community need.

Character Limit: 2000

Program Description and Proposed Activities*

Describe the proposed activities, services, scope of work and why you believe this will be effective.

How will this program help to increase access to shelter and safety for women living without

shelter who may be unsafe and in danger of harm? Include the organizational structures and personnel in place to effectively carryout the program.

Character Limit: 4000

Community Partners*

Describe how the program leverages other human and financial resources and how it collaborates with community partners. What other skills, knowledge and capacities are in place to support the program goals?

Character Limit: 2000

Assessment

Evaluation Plan*

What will success look like at the end of the grant period? Provide a clear plan to evaluate the results of the program in relation to the goals and activities stated in the question above regarding Program Description and Proposed Activities, including how you will monitor and measure success.

Character Limit: 2000

Previous Grant

If your organization received a grant from the Fund for Homeless Women last year, briefly summarize what has been accomplished to date and if anything unexpected occurred.

Character Limit: 2000

Funding Priority

Priority*

Which grantmaking priority does this proposal address? Check all that apply.

Choices

Emergency assistance, e.g., one-time motel vouchers, transportation, personal care
Expanded shelter and/or supportive services

Emergency Assistance question

Requests for Emergency Assistance

What types of direct assistance do you propose to provide (e.g., transportation, personal care, etc.)? Describe the criteria and process you will use to determine which individuals will receive financial assistance and who within the organization (staff and/or volunteers) will deliver this assistance.

Character Limit: 2000

Organization

Will this grant be managed by a nonprofit fiscal sponsor?*

501(c)3 nonprofit fiscal sponsors serve as the grant applicant on behalf of a group which does not have its nonprofit status recognized by the IRS. Fiscal sponsors agree to be responsible for managing grant funds and reporting requirements.

If your group is not an incorporated nonprofit organization, please speak with staff before submitting this application, 831.375.9712 or 754.5880.

Choices

No

Yes

Fiscally-Sponsored Groups

Community Foundation accepts applications from unincorporated groups when a 501(c)3 nonprofit fiscal sponsor serves as the legal and financial manager. Fiscal sponsors agree to be responsible for managing grant funds.

Complete this section **ONLY** if this application is being submitted by an unincorporated group working with fiscal sponsor.

Provide a brief summary of the sponsored group's mission/purpose.

Character Limit: 2000

What is the legal name of the nonprofit fiscal sponsor?

Character Limit: 200

Fiscal Sponsor's Tax Exemption

What is the nonprofit fiscal sponsor's tax exempt number or employer identification number (issued by the IRS)?

Character Limit: 10

What is the current annual budget of the sponsored group?

Character Limit: 20

Organizational Budget (of the sponsored group)

Upload a detailed organizational budget (for the year reflected in the grant request) including both income and expenses.

File Size Limit: 2 MB

Leadership (of the sponsored group)

List the names of the advisory members and leaders responsible for implementing the proposed work. Include their city of residence and profession/expertise.

Character Limit: 1500

Memorandum of Agreement

Upload a copy of the memorandum of agreement between the fiscal sponsor and the sponsored group.

File Size Limit: 2 MB

Name of Executive Director or Other Authorized Representative of Fiscal Sponsor (Fiscally Sponsored Applications Only)

Nonprofit fiscal sponsors agree to be accountable to the Community Foundation for the management and reporting of expenses related to this grant. IF a grant is approved, I agree to be responsible for maintaining financial records and the final expense report.

Character Limit: 100

Title

Character Limit: 250

Organization Information

Organization's Mission Statement

Respond only if there has been a change since your last grant request.

Character Limit: 1000

Number of paid full-time employees

Respond only if there has been a change since your last grant request.

Character Limit: 4

Number of paid part-time employees

Respond only if there has been a change since your last grant request.

Character Limit: 4

Number of active volunteers

Respond only if there has been a change since your last grant request.

Character Limit: 4

Board of Directors*

List all current board members with their city of residence and profession/expertise.

Character Limit: 3000

Ten Largest Financial Gifts*

List the ten largest financial gifts (grants or donations from individuals or organizations including name of donor/organization and amount of gift) that the organization received in the most recent fiscal year. Donors who have requested anonymity may be listed as anonymous.

Character Limit: 1000

Financial Information

Date of Fiscal Year End

Character Limit: 10

Budget Narrative*

What is the total program budget? What time period does it cover? What other funding is committed and pending? How would a Fund for Homeless Women grant be used and why is it needed at this time? If this is an ongoing program, what are your plans for how it can be sustained? If applying for both Emergency Assistance and Shelter/housing Expansion, state the requested amount for each purpose.

For Emergency Assistance applications, indicate how funds would be used, expected results and how these expenses will be tracked.

Character Limit: 2000

Program Budget

Upload a program budget for this request. You are not required to use this template; however, it shows the level of information we are looking for, including, all project income sources (committed and pending) and all expenses, clearly showing the specific expenses this grant would support. Contact us if you have questions after reviewing this sample program budget. If you are applying for operating support, upload a document that more broadly describes how grant funds are expected to be used. A program budget is **not** required for applications only requesting Emergency Assistance.

File Size Limit: 2 MB

Organization Budget*

Upload a detailed organizational budget (for the year reflected in the grant request) including both income and expenses. (If this request is for a fiscally sponsored group, this and the following financial statements are for the sponsoring 501(c)3 nonprofit organization.)

File Size Limit: 3 MB

Balance Sheet or Statement of Financial Position (for most recently completed year)*

Upload a balance sheet for the most recently completed year. This financial statement lists the organization's assets and liabilities by category at a specific point in time. Examples of asset lines are cash, accounts receivable, prepaid expenses, property and equipment. Examples of

liability lines are accounts payable, salaries and wages, accrued vacation, plus equity/real estate, vehicles and long-term debt, etc.

File Size Limit: 3 MB

Profit & Loss Statement or Statement of Activities (for most recently completed year)*

Upload a profit and loss statement for most recently completed year. This financial statement lists income and expenses by categories. Examples of income are grants, individual donations, earned revenue and events. Examples of expense lines are salaries and wages, payroll taxes, insurance, contract services, occupancy/utilities/rent and vehicle operation/maintenance.

File Size Limit: 3 MB

Organization Agreement

We, the undersigned, certify that the practices of this organization conform to the non-discrimination policy as follows. This organization does not discriminate in its employment practices, volunteer opportunities or delivery of programs on the basis of race, religion, gender, national origin, age, disability, veteran status, marital status, sexual orientation, or any other characteristic protected by law.

We, the undersigned, hereby state that the information presented in this application is complete and factual. By typing our names below and submitting this application, we confirm our authority and have notified and secured approval from all parties. We hereby agree that funds, if granted, will be used only for the purpose described above unless written approval from the Community Foundation for Monterey County is received.

GRANT AGREEMENT

A grant from the Community Foundation for Monterey County (CFMC) is to be used only for the purposes described herein and is subject to the grantee's acceptance of the conditions specified below. Reviewing the grant agreement now will expedite payment IF a grant is approved.

Grant Period: 11-month grant, December 1, 2023 - October 31, 2024

Final Report Due: October 31, 2024

Purpose and Use of Funds: Grant funds must be spent within **11** months of the grant date and for the purposes stated in the grant proposal and specified above. Grant funds may not be used for any expenses incurred prior to the grant date. If something unexpected occurs or additional time to complete the funded activities is needed, you may request an extension or budget modification by email. No changes may be made in timing or budgetary use of the grant funds without the CFMC's advance written approval.

Required Reports: Organizations receiving a grant are expected to submit a final report, through this online grant system as scheduled. The final report consists of responses to questions describing funded activities and progress made towards the proposed objectives and goals. The organization is responsible for maintaining records of grant funds received and the expenses incurred until all grant requirements have been fulfilled and will provide additional detail to the CFMC in a reasonable time should it be requested. Inability to submit completed, timely reports may affect future eligibility for future grants. If the organization applies for another grant before this grant award is expended, you may be asked to submit a progress report on the grant objectives and expenditures, depending on the grant program.

Details regarding a grant, including annual report due dates and online materials submission (e.g., reports, photos, etc.) are saved in your online account. Email correspondence is used through our online grants manager. It is your responsibility to keep your online account and contact information current by informing us of any changes. More information is available in the Overview Guide to using our online grants system at <http://www.cfmco.org/apply> www.cfmco.org/apply.

Public Information: The CFMC encourages organizations to make announcements of grants upon receipt of the grant payment. The CFMC communications department is available to provide assistance in your communication efforts. We also welcome your photos reflecting the services made possible by the grant.

By submitting this grant application, we understand and agree with the grant agreement above.

Name of Authorized Board Member*

Character Limit: 100

Name of Executive Director or Other Authorized Representative*

(Second person, different than above)

Character Limit: 100

Title*

Character Limit: 50

Use this space for any optional comments or explanations regarding this grant application.

Character Limit: 2000