



The Greater Cedar Rapids  
Community Foundation

# FLOOD 2008 FUND GRANT APPLICATION COVER SHEET

Date of Application: \_\_\_\_\_

## ORGANIZATION INFORMATION

Name of organization \_\_\_\_\_ Legal name, if different \_\_\_\_\_

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_ Employer Identification Number (EIN) \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Web site \_\_\_\_\_

Name of top paid staff \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Name of contact person regarding this application \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Number of Full-Time Paid Staff: \_\_\_\_\_ Number of Part-Time Paid Staff: \_\_\_\_\_ Number of Volunteers: \_\_\_\_\_

Has this organization received a grant through the Community Fund, Momentum Fund, Linn County Endowment Fund or one of the competitive donor-advised funds in the last 18 months? \_\_\_\_\_ Yes \_\_\_\_\_ No

If not, please complete information in Section IV.

## PROPOSAL INFORMATION

Proposal Title \_\_\_\_\_

Please indicate which priority this application will address, using the three priorities outlined in the guidelines (more details in guidelines). Please choose only one, even if application meets multiple criteria.

1. Assisting individuals and families
2. Addressing systemic issues
3. Rebuilding non-profit stability

Project dates (if applicable): \_\_\_\_\_ Fiscal year end: \_\_\_\_\_

## BUDGET

Dollar amount requested: \_\_\_\_\_ \$ \_\_\_\_\_

Total project budget: \_\_\_\_\_ \$ \_\_\_\_\_

Total annual organization budget: \_\_\_\_\_ \$ \_\_\_\_\_

## AUTHORIZATION

Name and title of top paid staff : \_\_\_\_\_

**Signature** \_\_\_\_\_

Name and title of board chair: \_\_\_\_\_

**Signature** \_\_\_\_\_

## **PROPOSAL NARRATIVE**

Please use the following outline as a guide to your proposal narrative, and note the word limit listed after each portion.

### **I. PURPOSE OF GRANT**

- A. Situation:
- a. The opportunity, challenge, issue or need resulting from the June 2008 flood. (300 words)
  - b. The targeted population. Describe the demographics and targeted geographic area. (100 words)
  - c. How the focus was determined and who was involved in decision-making process. Please include community information/data used. (200 words)
- B. Proposal Design (please address all relevant items):
- a. Overall goals and specific objectives to address the above situation. (300 words)
  - b. Levels of activity to be undertaken (daily intake, number of meals, additional staff hired to address emergency needs, non-profit stabilization efforts); Estimated number of people to be served as a result of this proposal. (150 words)
  - c. Criteria or circumstance for offering services. Are there eligibility requirements that must be met in order to receive services? (100 words)
  - d. How the proposal complements similar work in the community. (100 words)
  - e. Do you know of any public funds that may be available for this proposal in the future? (100 words)

### **II. EVALUATION**

- A. Explain how you will evaluate and determine the success of this effort. (275 words)

### **III. FINANCIAL INFORMATION**

- A. Provide a brief budget and narrative identifying the estimated costs to implement the proposal (275 words). What percentage will be used for administrative costs? If there are other sources of support, including public agencies and other private funders, please specify (100 words). Please describe how this grant will support activities that are not already being covered by state and federal support (100 words).

### **IV. ORGANIZATIONS NOT CURRENTLY GRANTEEES OF THE GCRCF SHOULD SUBMIT THE FOLLOWING INFORMATION:**

Is your organization an IRS 501(c)(3) not-for-profit? \_\_\_\_\_ Yes \_\_\_\_\_ No

*If no*, is your organization a public agency/unit of government? \_\_\_\_\_ Yes \_\_\_\_\_ No

*If no*, check with Director of Programs for details on using fiscal agents; list name & address of fiscal agent:

\_\_\_\_\_ Fiscal agent's EIN number

- A. Brief summary of organization mission statement, core goals and organization's programs.
- B. The organization's relationship with other organizations working with similar missions. What is your organization's role relative to these organizations?

### **V. DOCUMENT UPLOADS**

From Current Grantees:

- A. Organizational Documents:

Current year board-approved budget

All Other Applicants:

- A. Organizational Documents:

Current year board-approved budget  
 Most current IRS determination letter  
 One complete set of audited financials  
 List of board members and their affiliations

- B. For non-501(c)3 organizations:

Confirmation letter of fiscal agent (if required)  
 Fiscal agent financial statements  
 Signed fiscal sponsorship agreement