

2023 Focus Grant Cycle 2 Application

PROGRAM DEADLINE: August 31, 2023 at 11:59 PM PDT (Midnight)

Organization Information

Basic Information

Applicant Organization Name *

Please use the organization's legal name here, per your IRS nonprofit designation letter.

Tax Status *

- 501(c)(3) nonprofit
- Government (includes public schools) or tribal agency
- Church/religious organization
- Not a nonprofit organization; we have a fiscal sponsor
- Other

Tax ID #/EIN: *

Do not include the hyphen. For example, 911246778. If you're using a fiscal sponsor, enter the Tax ID/EIN of your fiscal sponsor.

Name of Fiscal Sponsor *

Please upload a copy of your Fiscal Sponsorship Agreement/MOU. *

Select File

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Maximum File Size: 20MB

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To learn more about fiscal sponsorships, visit: <http://www.fiscalsponsors.org/pages/about-fiscal-sponsorship>

Date of Incorporation: *

Clear

Street Address *

City *

State *

Zip Code *

Is your mailing address different from your street address? *

- Yes
 No

Mailing Address *

List your mailing address if it different from your street address.

City *

State *

Zip Code *

Main Telephone *

Website Address

Personnel

Executive Director *

Executive Director Email *

Primary Contact Name *

The primary contact should be directly involved with this grant application and the program you are requesting funds for.

Primary Contact Title *

Primary Contact Telephone *

Primary Contact Email *

Total Number of Paid Staff (FTE): *

Organizational Profile

What is your annual operating budget? *

- Less than \$250,000
- Between \$250,000 - \$499,999
- Between \$500,000 - \$999,999
- Greater than \$1 Million

Please share your organization's mission statement and history of serving southwest Washington. *

The Community Foundation is committed to the values of equity, diversity, inclusion and belonging and actively strives to support these efforts locally and regionally. We approach this work with humility and seek to partner with organizations that are committed to addressing disparities in their organizations and in our community. We understand equity is valued by our community however we are not looking for broader language explaining why equity is important or having standard non-discrimination language provided.

Please share an example(s) of how your organization proactively promotes equity, diversity, inclusion and belonging in your work and if your organization has specific policies that take equity into mind. Examples include, but are not limited to, any culturally-specific/relevant programming offered; if your board/leadership is reflective of the community you serve, outreach and partnerships with historically under-resourced populations; projects located in communities lacking critical infrastructure or near culturally-specific business/services; and/or diversity or cultural engagement initiatives within your organization.

*

Does your organization actively practice non-discrimination for both staff and clients? Also, see our Non-Discrimination Policy: <https://www.cfsww.org/nonprofits/grant-programs-2/#nondisc> *

- Yes
- No

If not, why? *

Organizational Leadership

We want to learn more about your organizational leadership structure to understand how your organization supports and promotes values of equity, diversity, inclusion and belonging. As we highlighted in our [criteria guiding decision-making](#) and through our [community impact lens](#), we are committed to increasing our investments in organizations working to disrupt the cycle of intergenerational poverty with a targeted focus on organizations that partner with communities who have been disproportionately impacted by economic, racial and/or social inequities in our region.

For more on the Focus Grant program's target investments to priority populations, [click here](#) and see the FAQ: *Does the Focus Grant Program target its investments to specific priority populations?*

Has your organization been historically led by a person who identifies as Black, Native American/Indigenous, Latina/o/x, Native Hawaiian, Pasifika, or a Person of Color and is your board reflective of the community you serve? *

- Yes
 No

Please elaborate: *

To the best of your ability, please indicate the number of leaders (Executive Director/CEO/senior leadership/Board of Directors) in your organization who have the following identities and lived experiences that align with the Focus Grant program's priority populations.

Please download this table template and fill it out, then upload below.

Template Link

Once you have filled out the template, please save in any format and upload here. *

Select File

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Maximum File Size: 20MB
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If you do not collect this data for senior staff and/or Board Members, please explain.

Grant Request Overview

Grant Request Overview

We invest in the following community impact areas related to intergenerational poverty. Which area most closely aligns with the work you are requesting funding for? *

- Basic Human Needs
- Educational Attainment
- Asset Building

Basic Human Needs: Efforts to meet the basic needs of underserved individuals, families and communities

Educational Attainment: Efforts to provide equitable educational opportunities

Asset Building: Efforts to improve the financial health of people and communities facing the biggest barriers to economic mobility

Please select up to three areas of focus that describe your grant request. *

- Affordable Housing
- Animal Welfare
- Arts
- Behavioral/Mental Health
- Child Advocacy and Foster Care Supports
- Community Development
- Disability Services
- Disaster Relief
- Domestic Violence
- Early Childhood Education
- Economic Development
- Education - K-12
- Education - Post-Secondary
- Environmental Justice
- Equity and Support for Historically Under-Resourced Communities
- Financial Literacy
- Food Security
- Health and Wellness
- Homelessness
- Humanities - library, museum, cultural, public broadcast
- Immigrant/Refugee Services
- Legal Services
- Organizational Development (staff development, capacity building)
- Other Basic Need (clothing, personal/household items, technology, transportation)
- Public Policy
- Senior Citizen Services
- Small Business/Leadership Development
- Veterans and Military
- Wraparound Services
- Youth Development/Mentor Programs
- Other

If you selected Other, please specify. *

If you selected Equity and Support for Historically Under-Resourced Communities, is your organization led by members of the historically under-resourced community targeted by this grant? *

If you selected Organizational Development, please select an area of focus describing your organization's overall mission. *

- Affordable Housing
- Animal Welfare
- Arts
- Behavioral/Mental Health
- Child Advocacy and Foster Care Supports
- Community Development
- Disability Services
- Disaster Relief
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- Early Childhood Education
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- Veterans and Military
- Wraparound Services
- Youth Development/Mentor Programs
- Other

If you selected Other, please specify.

What priority population(s) does your organization and program/project serve? Select all that apply. *

- Black
- Communities of Color
- Foster youth and young adults who have aged out of the foster care system
- Historically under-resourced communities or communities lacking critical infrastructure
- Immigrants and/or Refugees
- Indigenous
- Latino/a/x
- Native American/Alaska Native
- Native Hawaiian
- Pasifika
- People living on low incomes
- People who are unstably housed/unhoused
- People who identify as LGBTQ2S+
- People with behavioral health issues
- People with disabilities (developmental, intellectual, neurodivergent, physical)
- Rural and distressed communities
- Survivors of domestic violence, gender violence, and/or child abuse
- Other

If you selected Other, please specify.

Amount Requested from the Community Foundation *

\$

Beginning in 2021; all Focus Grants are awarded as general operating dollars. If your organization is headquartered outside of southwest Washington, we require that you include a southwest Washington program/project specific budget. (1 to 100000)

Program/Project Title *

Max Number of Words: 15

Please provide a brief description (1-2 sentences) of your request and how Community Foundation funds will be used. *

Min words required: 0 |

Max Number of Words: 100

Which counties will your grant request serve? *

- Clark
- Cowlitz
- Skamania

You may select up to two counties or select "All".

Grant Request Details

Grant Request Narrative

Describe the program(s) for which you are requesting funding. Please include a description of how you used community input to identify need, how your approach will equitably address that need and reduce disparities, a description of the population being served and details about your service delivery model (e.g., culturally-specific/culturally-responsive services, use of best practices, staff experience, etc.).

*

We prioritize funding organizations who work closely with the communities most impacted by poverty and who seek their clients/communities' input on programming and services. Please share if/how your organization provides culturally-specific/culturally-responsive outreach to the communities you serve or intend to serve. What efforts has your organization made to engage the voices, perspectives and expertise of the clients/communities you serve in developing your work? Include any challenges or opportunities you see here. Additionally, we are interested in learning how you engage relevant partners and/or participate in collaborative strategies.

*

Funding Sources

Please list all other funding sources and amounts for which you are seeking funding, including foundations, government agencies, businesses and in-kind support. Include whether this funding is confirmed, pending or planned.

Additionally, if your organization is awarded a Focus Grant, how will you sustain the proposed activities or build on what you hope to achieve after the grant period *

*

Financial Information

Financial Attachments & Narrative

All applicant organizations are required to submit organizational financial statements. If you headquartered outside of southwest Washington, please submit a southwest Washington program/project specific budget.

Please attach a copy of the organization's annual operating budget showing projected revenue and expenses for your current fiscal year. *

Select File

No file selected

Maximum File Size: 20MB

No file attached

Please attach a copy of the organization's Statement of Activities (also commonly called Profit & Loss Statement or Income Statement) showing actual revenues and expenses for your most recently completed fiscal year. *

Select File

No file selected

Maximum File Size: 20MB

No file attached

Please attach a copy of the organization's Balance Sheet (also called Statement of Financial Position) for your most recently completed fiscal year, showing assets and liabilities. *

Select File

No file selected

Maximum File Size: 20MB

No file attached

If you are headquartered outside of southwest Washington, please attach a southwest Washington program/project specific budget, showing revenues and expenses (separately) for the entire project/program period.

Select File

No file selected

Maximum File Size: 20MB

No file attached

Please provide a financial narrative if you'd like to elaborate on any special financial circumstances, anomalies, or budget assumptions.

Supplemental Information

Additional Documents

If needed, use this space to provide introduction or narrative of any downloaded documents to support your grant request.

Upload any additional information to support your grant request.

Select File

Choose File

No file selected

Maximum File Size: 20MB

No file attached

Examples of additional information include: brochures, letters of support, newspaper article, etc.

Upload any additional information to support your grant request.

Select File

Choose File

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Applicant Questionnaire

Applicant Feedback

How many hours did you spend completing this application? *

(Min Range: 0.00)

The Community Foundation strives to ensure the Focus Grant application is fair and equitable and continues to refine the application to achieve this goal. We welcome any feedback on the application process including any challenges you faced.

Submit Application

Certification

I certify that all information contained in this application is true and correct to the best of my knowledge, and that I am authorized to submit this grant application on behalf of my organization. *

I agree