

# Woods Charitable Fund Grant Application 2023

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*Woods Charitable Fund*

## *Applicant Questions*

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### **GRANT REQUEST**

#### **Project Name\***

*Character Limit: 100*

#### **Project Description\***

Give a brief summary of the purpose of your request.

*Character Limit: 4000*

#### **Objective & Effect\***

State the objective(s) and the underlying need, problem or opportunity. Describe the effect and anticipated outcome(s).

*Character Limit: 4000*

#### **Amount Requested\***

State the total amount you are requesting to the nearest hundred dollars.

*Character Limit: 20*

#### **Multi-year Funding Request\***

Indicate whether this request is for one year only or if it is a multi-year funding request.

##### **Choices**

Yes, multi-year funding

No, single-year funding

If this is a multi-year funding request, please list the years and the amount requested for each year.

*Character Limit: 200*

#### **Timing\***

State when funding is needed.

*Character Limit: 100*

#### **Anticipated Beginning Date of Project\***

*Character Limit: 10*

## Anticipated Ending Date of Project\*

*Character Limit: 10*

## Who and how many will be served?\*

Include as much relevant information as is available, such as location, socio-economic status, marginalized or underrepresented communities, ethnicity, gender, age, physical ability and language.

*Character Limit: 4000*

## Partnerships\*

Discuss partnerships relevant to this proposal. If none, state n/a.

*Character Limit: 3000*

## Work Plan\*

Include key dates, activities and actions in this Work Plan area. If you prefer to electronically submit your Work Plan, upload your document in the "Upload a file" area below.

*Character Limit: 3000 | File Size Limit: 1 MB*

## Evaluation Plan\*

State how proposed objective(s), activities and outcome(s) will be evaluated.

*Character Limit: 3000*

## FINANCIAL PLAN

### Project Budget\*

Please list sources and amounts of income, including this request, and their status (confirmed, pending, not yet applied for) and line-item expenses. Detail any line items in your budget that may need further clarification. If this is a multi-year request, indicate in budget. Or, if you have already created this document you may upload it below.

*Character Limit: 3000 | File Size Limit: 1 MB*

### Development Plan\*

If this is an ongoing program/project, how will it be sustained in the future?

*Character Limit: 3000*

### Board Financial Commitment\*

What percentage of your board makes a financial contribution to your organization? This could include donations, memberships, in-kind, etc.

*Character Limit: 500*

## MISSION AND BACKGROUND OF THE ORGANIZATION

## Mission

State your organization's mission statement.

*Character Limit: 1000*

## Background of organization

Please give a brief description of your organization's history and this program/project.

*Character Limit: 1000*

## Programs (for first-time applicants)

State key programs not otherwise included in this application.

*Character Limit: 1000*

## REQUIRED ORGANIZATIONAL SUPPORTING MATERIAL

### Operating Budget\*

Provide your organization's current fiscal year and, if different, the year for which support is requested (include sources and amounts of income for all years). Upload an electronic copy of your budget(s).

*File Size Limit: 1 MB*

### Financial Report-for the current period\*

Include the organization's year-to-date INCOME AND EXPENSE statement. Please upload an electronic copy.

*File Size Limit: 3 MB*

Include organization's year-to-date BALANCE SHEET

*File Size Limit: 2 MB*

### Review of Financial Statements\*

Provide the highest level financial statement review available for the most recent complete fiscal year. (If your statements are not audited or reviewed, indicate why and submit your balance sheet and income/expense statement for the most recent complete fiscal year.) Please upload a copy of your audit or review file. \*\*If you have trouble uploading your file, please contact our office.

*File Size Limit: 8 MB*

### Board of Directors & Staff\*

State the number and composition (ethnicity-gender) of each group (board and staff) for the last five years if available, by year. For the current board of directors, include only city and state addresses and affiliations. You may also include other aspects of diversity or relevance to your mission (lived experience, GLBTQ+, veteran status or others). Please use the text box provided or upload the information below. If additional space is required, use any of the Attachments #1 through #4 provided at the end of the application form.

*Character Limit: 4000 | File Size Limit: 1 MB*

## MISCELLANEOUS ATTACHMENTS

Be sure that any attachment contributes in an important way to the understanding of this proposal. Please upload any applicable electronic files.

### Attachment #1

*File Size Limit: 3 MB*

### Attachment #2

*File Size Limit: 2 MB*

### Attachment #3

*File Size Limit: 1 MB*

### Attachment #4

*File Size Limit: 1 MB*

## ELECTRONIC SIGNATURE APPROVAL (PREFERRED METHOD)\*

By entering the signature information and clicking "I Agree", you certify that the statements contained in this application are true and correct to the best of your knowledge and belief, and by submitting the application, it becomes the property of Woods Charitable Fund, Inc. If your organization does not permit you to use electronic signatures, please see Optional Signature Method below.

### Choices

I Agree

I Do Not Agree

## Chairperson or other authorized board member

*Character Limit: 75*

### Date

*Character Limit: 10*

## Chief Executive Officer

*Character Limit: 75*

### Date

*Character Limit: 10*

## OPTIONAL SIGNATURE METHOD

**If your organization does not permit you to use electronic signatures**, please print the signature page of this application using the "Application Packet" button at the top right of your screen.

After securing the necessary signatures, titles and dates on the form's designated areas, use the "Upload" feature below to attach the completed signature page and submit.

*File Size Limit: 1 MB*