2025 Grant Application

Organizational Profile

Date of application: _____

Organization name: _____

Year founded: _____

Employer Identification Number: _____

Street address/city/state/zip: _____

Executive Director: _____Phone:_____email:_____
(Or equivalent, please state title)

Development Director: _____Phone:_____email:_____
(Or equivalent, please state title)

Please indicate the primary contact, title and email address for this grant application:
_____

Website: _____

Describe the mission of your organization: _____

_____

_____

Please note: If you are a national organization, all information on this form, including the financial information on pages 3 and 4, should be for the Indiana chapter/program

Number of full-time employees: 2024 _____   2023 _____

Number of part-time employees: 2024 _____   2023_____

Number of volunteers: 2024 _____   2023_____

Number of unduplicated people served: 2024 _____   2023 _____

(How was this number determined?) _____

Signature and Title of responsible Officer of your organization: _____

<u>PLEASE LIMIT YOUR RESPONSE TO QUESTIONS BELOW TO A MAXIMUM OF 4 PAGES (MINIMUM FONT 12)</u>

1. What is the <u>purpose</u> of this grant proposal and what <u>dollar amount</u> is requested?

2. What <u>needs</u> does this request address and how would this request <u>impact</u> those needs?

3. What other non-profit(s) address the population and need that your organization targets?

4. List <u>timeframe</u> of your proposal:

5. How will the organization measure positive outcomes? What will the organization do if these outcomes are not met?

6. If this project is ongoing, what are your plans for <u>long-term funding</u>?

<u>Financial Information</u>

- Specific amount requested: _____

- Annual budget: _____

- Request is _____% of your annual organization budget

- List your organization's top 3 funders:

    Source: _____Amount:_____ Purpose:_____

    Source: _____Amount:_____ Purpose:_____

    Source: _____Amount:_____ Purpose:_____

- List funders who have committed to **THIS** project and the amount given or pledged:

    Source:_____Amount:_____Given:_____Pledged:_____

    Source:_____Amount:_____Given:_____Pledged:_____

    Source:_____Amount:_____Given:_____Pledged:_____

- Percentage of Board Members who contribute financially to your organization _____%
  Total Board Contributions: $_____

- Number of full Board meetings last year: _____
  Average % of Board members in attendance at those meetings_____%

- List the organization's top three salaries, including benefits:
  (If you reported "0" employees on page1, please name the top three recipients paid
   for services rendered)

  Position: _____   Salary: _____   Benefits: _____

  Position: _____   Salary: _____   Benefits: _____

  Position: _____   Salary: _____   Benefits: _____

  Name:_____   Services Rendered:_____ Amount:_____

  Name:_____   Services Rendered:_____ Amount:_____

  Name:_____   Services Rendered:_____ Amount:_____

- Does your organization have an endowment? ____
  What is its worth? _____
  What percent did you draw from the endowment last year? ____%

- List amount and nature of all outstanding debt as of application date: _____

  Board Members:

- Attach current list of board members, their occupation and their employer
- Did any board member (personally or via their employer) receive compensation? _____
- Did any board member's employer receive funding for services rendered? _____

  According to the guidelines on the checklist:

  ➢ Attach current organizational budget

  ➢ Attach actuals from last year

  ➢ Attach project budget, if applicable

  ➢ Attach current list of board members as specified above