

Greater Cincinnati Common Grant Application

Section One

Funder to which this application is directed			
Organization Data			
Applicant Organization (Full Legal Name)			
Doing Business As			
Previous Name, if changed			
Street Address			
City			
State			
Zip code			
County			
Mailing Address (if different than street address)			
City			
State			
Zip code			
E-mail			
Web site			
Phone (including area code)			
Fax (including area code)			
IRS Name, as listed on 501(c)(3) letter			
IRS letter date			
Tax Exempt ID # (EIN)			
Executive Director			
Direct Phone			
Organization's Budgeted Expenses for Current Year	\$		
Endowment Size	\$		
Organization's Major Funding Sources			
Organization's Affiliation and/or accreditation body (check all that apply)			
United Way		Fine Arts Fund	
Better Business Bureau		Other (specify)	
Chapter of national or regional organization (specify)			
Request Data			
Program/Project Title			
Total Budget for this Program/Project	\$		
Amount of this request	\$		
Proposal contact person information:			
Name			
Title			
Phone			
Fax			
E-mail			

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Community/Counties served by this Program/Project			
Brief demographic description of population served by this Program/Project			
Type of request (check all that apply)			
Capital		Technical assistance	
Operating		Endowment	
Program/Project		Start-up	
Signatures <i>(both are required unless otherwise specified by funder)</i>			
Signature of Executive Director			
Signature of Board President			

Before using the Common Grant Application, please call the funder to discuss your proposal and to request guidelines for additional information about the funder and how it uses the Application.

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The narratives for Sections Two through Six should not exceed five pages. Responses must be typed, single-spaced, single-sided and use a minimum of 12-point type.

Section Two – Profile of Organization

- 1) Brief summary of organization's history and statement of organization's mission
 - 2) Brief description of current programs/projects and activities
 - 3) Evidence of organization's overall effectiveness
 - 4) Description of population and geographic region served by this organization (if different than the project's as described in Section One)
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Section Three – Statement of Need

- 1) Statement of need project is attempting to meet and evidence of that need.
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Section Four – Program/Project Description & Methodology

IMPORTANT: Review this funder's program guidelines and restrictions before responding to this section.

- 1) Description of program/project, including:
 - a) Summary description of overall program/project to be funded under this grant
 - b) Brief description of how you propose to use the grant funds
 - c) Timetable for implementation
 - d) Duration of program/project
 - e) Evidence of use of best practices (For example, is this program/project based on a program that has been shown to be effective in other settings? Is it based on national standards? etc.)
 - 2) Will the organization collaborate with other organizations on this particular program/project?(If so, with whom and how?)
 - 3) Why is your organization qualified and appropriate to address this need or benefit?
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Section Five – Evaluation

- 1) Program/project goals and objectives
- 2) What are the measurable short term, intermediate and/or long term outcomes of this program/project?
- 3) What measurable outcomes will be achieved during this grant period?
- 4) How will outcomes be measured?
- 5) How will the results be used and disseminated?
- 6) If this is an existing ongoing program/project, summarize past quantitative and qualitative outcomes.

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Section Six – Program/Project Funding Plans

- 1) List of other funders to which **this current** proposal has been and will be submitted. For each funder, indicate amount requested and status of request, i.e., request will be submitted, is pending, was funded or was declined. If funded, specify amount of grant.
 - 2) Other anticipated funding for this current proposal including:
 - a) Earned revenue
 - b) In-kind support
 - c) Special events
 - d) Fundraisers, etc.
 - 3) If this will be an ongoing program/project, describe plans and specific sources for future/long-term funding.
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Section Seven – Required Financial Attachments

- 1) List of grants/sponsorships (including amounts) received during your organization's two most recently completed fiscal years.
- 2) Statement of Revenue/Support and Expenses for your organization's most recently completed fiscal/calendar year (see attached example form).*
- 3) Balance Sheet for most recently completed fiscal year.
- 4) Most recent, complete audit including auditor's notes. If the organization does not have an audit done, then send the most recent 990.
- 5) Budget for the current fiscal/calendar year including a column showing the organization's year-to-date status (see attached example form).*
- 6) Project Budget for your entire project (see attached sample form).*
- 7) Provide pro forma project budgets for the next three years, if there are ongoing expenses associated with your project which increase the organization's operating budget by 20% or more, or if this is a new organization. The purpose of the pro forma is to show how the organization plans to sustain the project.

*** If your existing financials are in a similar form as the attached example forms, they may be submitted. Please note that these are example forms and line items may be changed, if needed.**

Section Eight – Required Non-Financial Attachments

- 1) IRS letter of determination 501(c)(3), or if such a letter does not exist see specific funder requirements
- 2) Names and affiliations of board members
- 3) List of key staff members and qualifications, or an organizational chart
- 4) One example of each of the following (if available):
 - a) Annual reports
 - b) Organizational brochure
 - c) Sample newsletter

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d) Program

5) Letters of commitment from collaborating organizations, if appropriate.

The Common Grant Application is a collaborative effort of funders, non-profit organizations and consultants working to build the performance capability of not-for-profit and community organizations.

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STATEMENT OF REVENUE/SUPPORT & EXPENSE FOR MOST RECENTLY COMPLETED FISCAL YEAR

Name of Agency:

Time Period:

REVENUE/SUPPORT	
Corporate grants	
Foundation grants	
Govt. grants/contracts/per diem (identify)	
Contributions	
United Way	
Other federated campaigns (identify)	
Fine Arts Fund	
Membership dues	
Special events, fundraisers	
Sponsorships	
Admissions	
Sales, rent	
Revenue, tuition	
Investment income	
Interest, dividends	
Other	
Total Revenue/Support	
EXPENSES	
Salaries	
Employee benefits, taxes	
Professional fees	
Equipment, supplies, materials	
Telephone, utilities	
Postage, mailing	
Occupancy	
Insurance	
Training, staff development	
Travel	
Conferences	
Evaluations	
Other	
Total Expenses	
Revenue less Expenses	

**If expenses exceeded revenues/support, please explain.
Accompanying narrative welcome if additional explanation is warranted.**

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TOTAL AGENCY BUDGET FOR CURRENT FISCAL YEAR

Name of Agency:

Time Period:

REVENUE/SUPPORT	Budget for Year	Year-to-Date (specify date_____)
Corporate grants		
Foundation grants		
Govt. grants/contracts/per diem (identify)		
Contributions		
United Way		
Other federated campaigns (identify)		
Fine Arts Fund		
Membership dues		
Special events, fundraisers		
Sponsorships		
Admissions		
Sales, rent		
Revenue, tuition		
Investment income		
Interest, dividends		
Other		
Total Revenue/Support		
EXPENSES		
Salaries		
Employee benefits, taxes		
Professional fees		
Equipment, supplies, materials		
Telephone, utilities		
Postage, mailing		
Occupancy		
Insurance		
Training, staff development		
Travel		
Conferences		
Evaluations		
Other		
Total Expenses		
Revenue less Expenses		

If expenses exceed revenues/support, please explain how difference will be offset.

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PROGRAM REQUEST BUDGET

Name of Project:

Time Period:

<i>(Items typical for operating a program)</i>	BUDGET
REVENUE/SUPPORT	
Corporate grants	
Foundation grants	
Govt. grants/contracts/per diem (identify)	
Contributions	
United Way	
Other federated campaigns (identify)	
Fine Arts Fund	
Membership dues	
Special events, fundraisers	
Sponsorships	
Admissions	
Sales, rent	
Revenue, tuition	
Investment income	
Interest, dividends	
Other	
Total Revenue/Support	
EXPENSES	
Salaries	
Employee benefits, taxes	
Professional fees	
Equipment, supplies, materials	
Telephone, utilities	
Postage, mailing	
Occupancy	
Insurance	
Training, staff development	
Travel	
Conferences	
Evaluations	
Other	
Total Expenses	
Revenue less Expenses	

If expenses exceed revenues/support, please explain how difference will be offset. Accompanying narrative welcome if additional explanation is warranted, for example an explanation of in-kind gifts.

CAPITAL REQUEST BUDGET

