Standard Application Process

Medina Foundation

Basic Information

Helpful Tips:

- *Please note that character limits include spaces. See note on character limits below.*

- *To preview questions (in Word or PDF format), view the* **Sample Documents** *page on our website.*

- *To view past requests, click "Organization History" from the dashboard menu.* **You may cut and paste, where appropriate, from past requests by transferring answers to a Word document.**

- *We recommend preparing your answers in Word prior to submitting, in order to back up your data.*

- *Information that has been carried over from the LOI should not be changed in any significant way without contacting us first.*

- *To return later to finish or submit your request, click "Save" at the bottom of the form.*

- *To preview the request prior to submission or save a copy, click the "Application Packet" PDF button at top right.*

- *To allow multiple users to work on this request, click the blue "***Collaborate***" button at top right. Collaborator Feature: Video Tutorial and Written Tutorial*

- *View our* **E-Grant System FAQs** *for more information.*

In response to feedback, we have made some changes to our forms. While we do not expect you to use the maximum character limits, most responses have been given the maximum allowable count to save you time editing. Please be brief with your answers, for the sake of your time and ours, and feel free to use bullet points or short answers. If information has been covered in a prior question, you can refer to previous answers. Please do not repeat information.

Organization's Mission Statement*

Please provide your organization's mission statement.

Character Limit: 2000

Organization's General Purpose*

What is the general purpose of your organization? What gap is the organization filling and what unique role does the organization play in providing these services?

Character Limit: 10000

Organization Legal Name

Organization name as registered with the IRS (if different than the organization name in the e-grant system).

Character Limit: 100

Year Organization Incorporated*

In what year was your organization incorporated?

Character Limit: 4

Primary Services*

Please list up to four of your organization's primary services in the following numbered format: e.g. 1. Parent education; 2. Therapeutic child care; 3. etc.; 4. etc.

Character Limit: 250

Project Name*

If your organization is requesting funds for a specific project, e.g., Youth Tutoring Program, or Housing Case Management Services, please list that particular program as the "Project Name." However, **if you are requesting funds for general operating, please list "General Operating" as the Project Name.**

Character Limit: 100

Project Description

For what purpose are you requesting funds? Please describe the **objectives** related to this request. **If you are requesting General Operating support, give a general description of how your organization operates, who you serve, and how.** If you are requesting project support, please explain how it aligns with your overall mission.

Character Limit: 10000

Amount Requested*

Character Limit: 20

Funding Type
Choices
General Operating
Project Support
Capital Campaign
General Operating + Capital

Primary Geographic Area*

This is the primary geographic area that your organization reported providing services in.
Please contact us if you wish to change this.

Choices

Clallam County
Grays Harbor County
Island County
Jefferson County
King County
Kitsap County
Mason County
Pacific County
Pierce County
San Juan County
Skagit County
Snohomish County
Thurston County
Whatcom County

Secondary Geographic Area

If your organization provides services in more than one county, this is the county in which your organization provides the most services after the primary county.

Choices

Clallam County
Grays Harbor County
Island County
Jefferson County
King County
Kitsap County
Mason County
Pacific County
Pierce County
San Juan County
Skagit County
Snohomish County
Thurston County
Whatcom County

Name of Executive Director*

Name of Executive Director/CEO or equivalent.

Please email us with new Executive Director contact information if this has changed from when you first submitted your LOI.

Character Limit: 100

Executive Director Resume*

Please upload a copy of the executive director's resume.

File Size Limit: 2 MB

Executive Director/CEO Salary*
List the salary of the Executive Director/CEO

Character Limit: 20

Please list the titles and salaries of the next two highest paid employees after the Executive Director.
We would appreciate your sharing this information below to assist in our review. There are no right or wrong answers, as salaries are based on a number of factors specific to your organization. However, this information helps in our overall analysis of your organization's structure and practices. We support the value of transparency within nonprofit organizations and foundations. If this information does not apply to your organization (ie, you have fewer than three paid staff positions), please leave the appropriate fields blank.

1) Title
Character Limit: 100

1) Salary
Character Limit: 10

2) Title
Character Limit: 100

2) Salary
Character Limit: 10

Full Time Equivalent (FTE) Employees*
Please list the number of full time employees or full time equivalents (FTEs) your organization employs.

Character Limit: 10

Volunteers*
Please list the number of people who volunteer for your organization during any calendar or fiscal year.

Character Limit: 10

Volunteer Hours*
Please list the total annual of volunteer hours.

Character Limit: 10

Board of Directors*
Please upload a list of the names and affiliations of your board of directors. In addition, please list the names of those members who also serve on your executive committee in the space below.

<u>**Note:**</u> If the applicant organization is a local affiliate of a national organization, please upload the <u>local board</u> or <u>local advisory board</u> list instead of the national one. If there is no local/advisory board for your chapter, please specify so in the box below and upload the national board list instead.

Character Limit: 1500 | File Size Limit: 2 MB

Governing Board*

How many meetings were held last fiscal year for the governing board?

Character Limit: 5

Board Contributions*

Please list the **percentage** of your organization's board members who contribute to your organization.

Character Limit: 3

Physical Address*

Please list your organization's physical address (this is helpful if scheduling in-person site visits, although you may change the site visit location later).

Character Limit: 75

Organizational Overview

<u>Instructions and helpful tips:</u>

- The following questions relate to your organization as a whole.
- Please answer the following questions concisely and avoid repeating information. Bullet points are encouraged.
- Brevity is encouraged out of respect for your time. A program officer follows up with every request at a site visit, which is a chance to discuss your programs further.
- Contact us if you have any questions, concerns, or feedback (see "Feedback" section at end of form).
- Be sure to click "Submit" when finished.

Clients served*

Please include the number of clients served both during the prior full year and year-to-date. In addition, please describe the demographics and challenges of clients served.

Character Limit: 10000

Similar Programs*

Who else offers similar programs in your service area? How do you work with other providers in your community?

Character Limit: 10000

Planning*

To what extent are you engaging in long-term planning and/or strategic planning? Please provide a brief highlight of your most recent strategic plan.

Character Limit: 10000

Have there recently been, or do you anticipate, any organizational or leadership changes?*

Character Limit: 10000

What are the long-term funding plans for your organization's operating budget?*

Character Limit: 10000

Specific Grant Request

- **The following questions relate to this specific grant request.**
- **If this request is for a specific project or program, please answer the following questions with that project in mind.**
- **Please complete the following questions even if your request is for general operating support.**
- Be concise and avoid repeating information. Bullet points are encouraged.
- For capital requests, please provide answers that relate to both the request as well as the organization.

What opportunity, issue or need are you trying to address with this work?*

In other words, what is the *problem* that is being addressed with this specific intervention?

Character Limit: 10000

Community Engagement*

To what extent have you included the community you are trying to serve in the design of your project or program?

Character Limit: 10000

Please describe your specific workplan as it relates to your request.*

How do you achieve your stated goals and objectives?

Character Limit: 10000

Evaluation*

Please explain the **methods** of evaluation your organization uses to assess impact and track outcomes.

Character Limit: 10000

Outcomes*

Please list the most recent **results** of your evaluations, or any relevant outcomes.

Character Limit: 10000

What is your plan for future funding of this project?

If this request is for general operating support and you have already answered this question above, please skip this question.

Character Limit: 10000

Financial Information

Organization Budget*

The total amount of your organization's operating budget

Character Limit: 20

Project Budget*

If you are applying for a specific project or program, and not general operating dollars, please insert the amount of the project or program budget. If you are applying for general operating dollars, please put a zero in the box below.

Character Limit: 20

Organizational & Project Budgets*

Please use the Medina Foundation budget format for your agency operating budget and project budget (if applicable). Capital budgets are uploaded separately and can be in your own format.

Click herehttp://www.medinafoundation.org/index.php?p=Application_documents&s=137to download the Medina Foundation budget template (in Excel). Fill out the Organization budget on the first sheet. **If you are applying for Program/Project funds, please fill out the form on the second sheet as well.** Once complete, please upload the file (in Excel) below.

Operating and project budgets must reflect the fiscal year for which the grant is requested. *If you already have a draft budget/forecast for the next fiscal year, please include that as well. Otherwise, you may leave this column blank.*

File Size Limit: 2 MB

We appreciate you filling out the budget template. We find that there are some questions that are really helpful in addition to that. The next few questions are meant to further illustrate your financial picture, and approximate answers are fine. *We have left ample room for responses, but please feel free to answer these as briefly as possible.*

Typical operating budget over the past few years:*
Character Limit: 20

Roughly how many months of reserves do you have, if applicable?*
Character Limit: 5000

Does your organization have an endowment? If so, are there plans for its use?*
Character Limit: 5000

Roughly how much of your income (%) is general operating or unrestricted funding?
Character Limit: 5000

Roughly how much of your income (%) is private vs. public?
Character Limit: 5000

If you have earned income, what source(s) does this come from?
Character Limit: 10000

Surplus/Deficit
If you have budgeted a surplus, what are your plans for that surplus? If you have budgeted a deficit, how do you plan to cover it?

Character Limit: 10000

Are there any major changes to your budget you anticipate in the next year?
Character Limit: 10000

Additional Financial Narrative
Is there anything else about your budget that you would like to share with us that is not covered in the previous questions?

Character Limit: 10000

Capital Budget (if applicable)
If you are applying for a capital project, you are welcome to use your own budget format. Please include the following information:

1) Capital project budget including income, projected income and expenses
2) Explanation of how debt service, maintenance and operating expenses will be met
3) Size of proposed facility and cost per square foot
4) Anticipated completion date

File Size Limit: 2 MB

Balance Sheet*

Please upload a recent **Balance Sheet** (within the past 3 months) showing total **Assets and Liabilities**, including any off-balance accounts.

Please do not upload a Profit & Loss (Statement of Revenue & Expenditures). We do not require these documents. Income/Expenses are reported in the application Budget template.

Note: If uploading a pdf document, it is helpful if this is in Portrait mode rather than Landscape.

File Size Limit: 2 MB

Audited Financial Statements or 990*

Please upload your audited financial statements for the last fiscal year. If this is not applicable, please upload a copy of your latest 990.

File Size Limit: 8 MB

Other Contributors

Corporate and Foundation Contributions*

Click <u>here</u><u>http://www.medinafoundation.org/index.php?p=Application_documents&s=137</u>to download the template to list your major foundation and corporate contributors (in Word). Once it is complete, please upload the file below.

We kindly request that you include major contributors for the past two years and those who your agency is approaching in the current fiscal year. The purpose is to get a general sense of your other contributors rather than a comprehensive list. ***Please limit your list to no more than 2 pages.*** *What constitutes a "major" contribution is defined by the organization and can be over any internally determined threshold/dollar amount.*

<u>Notes:</u>

- If you already have this information in a different document, feel free to attach that instead. Please include the contributor name, amount, year received (or pending/projected), and project name.
- If the applicant organization is a local affiliate of a national organization, please focus on <u>local contributors</u> instead of national.

File Size Limit: 5 MB

ELECTRONIC SIGNATURE

ELECTRONIC SIGNATURE*

Enter your full name *(i.e., Jane Smith)*

Character Limit: 100

Enter your business title*

i.e., Executive Director

Character Limit: 100

Date of Signature*

Select the date of electronic signature

Character Limit: 10

Signature*

By entering your signature information above and clicking "I Agree" below, you certify that the statements contained in this application are true and correct to the best of your knowledge and belief.

Choices

I Agree.
I Do Not Agree.

Be sure to click "Submit" at the bottom of this page when finished! (You may click "Save" to return to your work later.) You will receive an automatic email notification when your submission has been received. If you believe you have submitted your application but do not receive this message, please contact us.

Feedback

Optional User Experience Rating

How difficult / time consuming would you rate this application process?
1 = very easy, quick, simple
10 = very difficult, time consuming, complicated

Scoring Options: 1 - 10

Application Form Feedback

We value feedback from our applicants as an important part of improving our work and processes.

Please use this space to share any feedback you may have regarding the application process and our online system. To provide feedback anonymously, **please take our brief survey here** or submit a **review on GrantAdvisor.org.**

Note: Information entered below will *not* be considered as part of the application.

Staff reviews feedback periodically and makes adjustments to our instructions, processes, and

website accordingly. Please check our E-Grant System FAQs, General FAQs, and medinafoundation.org/feedback for updates. **If you would like to discuss any feedback, or have questions, please call us at 206-652-8783 or email alexia@medinafoundation.org.**

Character Limit: 5000