

**2019 Grants for Change**

**Grant Application Form**

**Section A: General Information**

This first section asks for general organizational information. Please share the following:

1. Organization Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Share your organization’s Mission Statement:
3. What is your website address (If you have one):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. What is your Facebook address (If you have one):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The following questions ask about the people involved in your organization and the partners you work with:

1. Does your organization have paid staff? Yes/No How many?\_\_\_\_\_\_\_\_\_\_\_\_
2. Does your organization have volunteer staff? Yes/No How many?\_\_\_\_\_\_\_\_\_\_\_\_
3. List up to four organizations or groups that are consistent or significant partners in the work you do:
4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
7. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
8. Has your organization received a previous grant from Maine Initiatives? Yes/No

If yes, please note when and at what amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Who is the Director of your organization?

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Office Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Who is the Contact Person for this proposal (if different from the Director)?

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Office Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section B: The Narrative Proposal**

This proposal narrative is your opportunity to share with our Proposal Readers and Grants Advisory Committee information about your organization and the work you do to advance racial justice in Maine.

Please write a **maximum of four (4) pages, single spaced with 12 point font,** addressing the following six (6) questions. Please note, the word counts are only approximations and are completely optional. We include them to help guide you in dividing up your proposal narrative, but again, they are provided only as suggestions.

1. **Your Organization (approximately 350 Words)**

Please explain what your organization seeks to achieve in Maine. Why is your mission important, especially in the context of Maine in 2019?

1. **Your Work (approximately 300 words)**

What programs and activities does your organization implement to achieve its mission?

1. **Advancing Racial Justice (approximately 450 words)**

Which of our funding priorities does your work align with?

* Advancing racial justice through work that addresses systemic, structural, and institutional expressions of racial injustice;
* Prioritizing leadership by and work that strengthens Maine’s Native American/Wabanaki and African-American communities in Maine; and
* Strengthening community building, community organizing, grassroots advocacy and policy change as central strategies for advancing racial justice and equity.

Please explain how your organization works to advance racial justice in Maine through one or more of the above priorities.

1. **Who You Work With (approximately 250 words)**

What racial or ethnic communities or groups are most impacted by your work and where are they geographically located?

1. **Leadership and Empowerment (approximately 250 words)**

Please explain the ways Black, Indigenous, and/or other People of Color are engaged in the design and implementation of your organization’s programming; the decision-making process within your organization; and the evaluation of your organization’s success and effectiveness.

1. **Success (approximately 350 words)**

How do you know that your organization is being successful advancing racial justice in Maine? Please provide a story that will illustrate this impact.

**Section C: Organizational Leadership**

This section will help our Readers and Grantmaking Committee gain a clearer picture of the people involved in your organization.

1. Is your organization led by Black, Indigenous, and/or other People of Color?

Yes / No

Please explain your answer.

(Note: While leadership by Black, Indigenous, and/or other People of Color is not a requirement to receive a grant, this question is an important criterion in the grantmaking process. This question is intended to make space for you to explain your leadership model and staff structure.)

1. Provide a full listing of your Board Members and include their work affiliation and town of residence. This can be included as an attachment or you may use the following chart.

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Role on Board | Work or Other Volunteer Affiliation | Town of Residence |
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**Section D: Program Areas**

This section will help our Grants Advisory Committee better understand the specific program areas in which your organization works. The following list of program areas corresponds to the major themes identified in our Maine Insights report ([www.maineinitiatives.org/maineinsights](http://www.maineinitiatives.org/maineinsights)) and the past three application pools for the Grants for Change program.

* + - 1. From the following list, please indicate the top three (3) areas in which your organization works:

\_\_\_\_ Agriculture/Food Security

\_\_\_\_ Arts and Culture

\_\_\_\_ Black Liberation

\_\_\_\_ Criminal Justice

\_\_\_\_ Decolonization

\_\_\_\_ Education

\_\_\_\_ Environmental Activism

\_\_\_\_ Gender Equity

\_\_\_\_ Good Governance and Democracy

\_\_\_\_ Health Equity

\_\_\_\_ Housing

\_\_\_\_ Immigrants’ Rights

\_\_\_\_ Legal Aid

\_\_\_\_ LGBTQ+ Rights

\_\_\_\_ Organizing and Advocacy

\_\_\_\_ Poverty and Economic Opportunity

\_\_\_\_ Transportation

\_\_\_\_ Tribal Rights and Sovereignty

\_\_\_\_ Youth Empowerment and Leadership

\_\_\_\_ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Please explain why you chose these three programmatic areas:

**Section E: Legal/Fiscal Organization**

This section is needed for the fiscal administration of any grants made by Maine Initiatives. Maine Initiatives does fund organizations who do not have official 501(c)(3) status, but any such applicants will need to obtain a fiscal sponsor or sponsorship by a Tribal entity before the Grantmaking Advisory Committee’s Retreat in October 2019.

* Is this application presented on behalf of a Tribal government or other entity? Yes/No
	+ If yes, please indicate the Tribal government or other entity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Does your organization have 501(c)(3) status? Yes/No
* If you do not have your 501(c)(3) status, please name your Fiscal Sponsor (if you have one)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* What is your Organizational EIN or the EIN of your Fiscal Sponsor? (if you have one) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section F: Organizational Budget**

This section requests general budgetary information about your organization. A review of your budget will help our Grantmaking Committee members better understand the fiscal health of your organization and your funding model.

* Please provide a breakdown of your operating income and expenses (Budget) for your most recent completed fiscal year. If this is your first year, please submit a current budget. You may attach your own spreadsheet or may use the format provided below.
* Does your organization have audited financial statements? If so, please provide a copy of your most recent audit.

Organizational Budget Template

Budget Start Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Budget End Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
| Income Type | BudgetedAmount | Actuals Amount | Notes |
| Government Grants/Contracts |  |  |  |
| Foundation and Corporate Grants (please list names and amounts in Notes field) |  |  |  |
| Individual Contributions |  |  |  |
| Earned Income (please specify in Notes field) |  |  |  |
| Interest Income |  |  |  |
| In Kind Support (please specify in Notes field) |  |  |  |
| Other Income(please specify in Notes field) |  |  |  |
| Income Total |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Expense Type | Budgeted Amount | Actuals Amount | Notes |
| Program Expenses |  |  |  |
| Staff Salaries |  |  |  |
| Administrative Expenses |  |  |  |
| Fundraising Expenses |  |  |  |
| Other Expenses: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
| Other Expenses: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
| Other Expenses: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
| Expense Total |  |  |  |

**Section G: Anything Else?**

In no more than one (1) additional page, please share with us anything you wish we would have asked about, but didn’t, or anything else that will help our Readers and Grantmaking Committee make their decisions. Photos, charts and graphs, or newspaper and blog post links are all appropriate to include here. Please note, no additional supplemental materials are allowed beyond this page.