Spring 2022 Community Needs Grant

DuPage Foundation

Basic Information

Project Name*

Provide a brief name for your project.

Character Limit: 100

Purpose*

Briefly describe the purpose of your request - Example: To support (name or type of program) that will (what the project will ultimately do).

Character Limit: 200

Program Area*

Which program area best describes your request? (Selection should be based on the program/project content, not necessarily the type of organization.)

Choices

Health & Human Services - Spring Cycle Only Education - Fall Cycle Only Arts & Culture - Fall Cycle Only

Environment - Fall Cycle Only Animal Welfare - Fall Cycle Only

Sub-Program Area*

Choices

Animal Welfare

Arts & Culture

Civil Rights

Counseling

Disabilities

Early Childhood Care and Education

Education

Emergency Assistance (financial)

Employment

Entrepreneurship

Environment

Gender Equity

Health Services

Household Supplies

Housing, Shelter

Legal Services

LGBTQ+ Services

Mental Health

Nutrition, Clothing

Racial Justice

Recreation

Refugee/Immigrant Services

Senior Services

Technology

Youth Development

Type of Funding*

Specify the type of funding you are requesting.

Choices

Equipment/Supplies

General Operating

Program Support

Salary Support

Population Served*

Which population best describes those who will be served by this program/project?

Choices

Adults

Animals

Children/Youth

Disabled-Developmental

Disabled-Physical

Families

General Public

Immigrants

Incarcerated Adults

Incarcerated Juveniles

Infants/Toddlers

LGBTQ

Low-Income

People of Color

Seniors

Veterans

Women

Program/Project Cost*

What is the total cost of your program/project?

Character Limit: 20

Grant Amount Requested*

What amount is requested from the DuPage Foundation? (Maximum grant request: \$25,000)

Note: Special consideration may be provided for merged organizations in which both of the

agencies that have merged received a Community Needs grant during the past two years. Agencies are eligible for special consideration for up to three years following the merge. Contact Barb Szczepaniak to discuss the maximum award amount.

Character Limit: 20

Application Narrative

Organization Description*

What is the overall purpose or mission of your organization? Include a brief history, the date established, and the date 501(c)(3) status was granted.

Character Limit: 2500

Operations*

Describe anything significant that occurred within your organization this year that has impacted your operations.

Character Limit: 2000

Describe how your organization has adjusted to the COVID-19 pandemic and the evolving world around us. *

Character Limit: 2000

Program/Project Description*

Describe the program/project to be funded.

Character Limit: 2500

Use of Funds*

How will you specifically use the grant funds that are being requested?

Character Limit: 2500

Has DuPage Foundation previously funded this program/project?*

Choices

Yes

No

Alignment with Community Needs Priorities

Please describe how this program aligns with the Community Needs priorities in the category in which application is being submitted.

Spring Cycle

Health & Human Services

Primarily supports programs that align with the current Impact DuPage health & human needs priorities: affordable housing, behavior health and health status improvement.

Fall Cycle

Education

Primarily supports pathways to self-sufficiency including financial, health and language/math literacy and/or the development of leadership skills.

Arts & Culture

Primarily supports programs that offer broad access, outreach and/or unique opportunities to enrich arts & cultural experiences.

Environment

Supports environmental education, programs that promote conservation and restoration of natural areas, habitats, and green spaces; efforts to reduce pollution and waste; and programs that protect wildlife and endangered species.

Animal Welfare

Supports programs that promote the well-being of domestic animals.

Character Limit: 2500

Sustainability*

Is this a new, continuing or one-time program/project?

Character Limit: 2000

What are your plans for fully funding and sustaining this program/project?*

Character Limit: 1000

Specify other funding sources or steps you have already taken to get additional funding to support it.*

Character Limit: 1000

Collaboration*

What other agencies are you working with on this program/project? Describe partnerships and activities.

Character Limit: 1500

Glen Ellyn Arts & Culture or Environmental Project*

Is your organization submitting an application for an arts & culture or environment project that primarily benefits Glen Ellyn residents?

Note: If yes, answer the questions in the "Glen Ellyn Arts & Culture or Environmental Projects" section. If no, answer the questions in the "Impact" section.

Choices

Yes

No

Impact

Impact*

What percent of the population served by your organization are DuPage residents?

Character Limit: 500

What percent of the population served by this program/project are DuPage residents?*

Character Limit: 500

What specific community or communities will benefit from this program/project? (Cities, towns, villages)*

Character Limit: 500

How many individuals will be served by this program/project? *

Character Limit: 500

How many individuals have been served by this program/project in the past three years?*

Character Limit: 500

How many individuals have been served by your organization in the past three years? *

Character Limit: 500

For applications in the health & human services and education categories, <u>approximately</u> what percent of those served by this program/project have household income at or below DuPage County's median household income?

Character Limit: 500

Glen Ellyn Arts & Culture or Environmental Projects

Impact for Glen Ellyn Residents*

How many Glen Ellyn residents will benefit from this project?

Character Limit: 250

Value of Project for Glen Ellyn Residents*

How does this project provide value, above and beyond what currently exists, for the residents of Glen Ellyn?

Character Limit: 2500

Annual Budget*

Is funding for this Glen Ellyn focused project/program currently part of the agency's annual budget?

Choices

Yes

No

Board, Staff & Volunteers

Board Members*

Please enter or upload a list of your board members with addresses.

Character Limit: 2000 | File Size Limit: 1 MB

What percentage of your board of directors supported the organization with a personal financial gift this past fiscal year? If not 100%, please explain.*

Character Limit: 1000

Do any of your board members have lived experience related to the types of services you provide or are past clients of your organization? If so, please describe.

Character Limit: 1000

Staff*

Please enter or upload a list of management and pertinent staff members.

Character Limit: 1000 | File Size Limit: 1 MB

Volunteers

Please describe how volunteers (including board and committee members) actively contribute to the overall work of your organization.

Character Limit: 2000

Demographics

What is the <u>estimated</u> demographic distribution you expect will be served with this grant? (Responses must add up to 100%)

Caucasian*

Character Limit: 10

African-American*

Character Limit: 10

Latino/Hispanic*

Character Limit: 10

Asian*

Character Limit: 10

American Indian or Alaskan Native*

Character Limit: 10

Other*

Character Limit: 10

Did your organization receive a 2021 Community Needs Grant?*

Note: If yes, answer the questions in the "Progress Report" section.

Choices

Yes

No

Progress Report

Progress/Final Report Status

If you received a Community Needs grant in 2021, did you submit a final report yet? If not, please respond to the remaining questions in the Progress Report section of this application. (Please note that final reports are still due by the following dates: May 1, 2022 for human services grants and November 1, 2022 for education, arts & culture, environment and animal welfare grants. Final report questions are available under the Follow-up tab in your 2021 application.)

Choices

Yes

No

Program/Project Progress

If you received a Community Needs grant in 2021 and have not yet completed a final report, please describe how the funded project/program has progressed to date.

Character Limit: 2000 | File Size Limit: 2 MB

Impact

If you received a Community Needs grant in 2021 and have not yet completed a final report:

- 1. Describe the impact the project has had on those served.
- 2. How many individuals have been served?
- 3. If the grant exceeded \$2,500, provide an update of project outcomes related to the program objectives that were identified in the Outcome Measures Table that was submitted with your application.

Character Limit: 2000

Project Variation

If you received a Community Needs grant in 2021 and have not yet completed a final report, please indicate whether the project has differed in execution from that which was presented in your initial application. Please explain.

Character Limit: 2000

Problems/Benefits/Lessons Learned

If you received a Community Needs grant in 2021 and have not yet completed a final report, please describe any problems you've encountered, unexpected benefits realized or lessons learned to date.

Character Limit: 2000

Attachments

Outcome Measures Table*

Please download the <u>Outcome Measures Table</u>. You will need to complete and save the Outcome Measures Table before uploading it below.

File Size Limit: 1 MB

Program/Project Budget*

Submit a program/project budget relating to the grant request, indicating how the grant requested will be used.

File Size Limit: 1 MB

Current Fiscal Year Operating Budget*

Submit a current fiscal year operating budget.

File Size Limit: 2 MB

990 Form*

Please upload your most recent IRS 990 or 990-EZ.

File Size Limit: 3 MB

Financial Indicators Form*

Please download the <u>Financial Indicators Form</u>. You will need to complete and save the form before uploading it below.

File Size Limit: 1 MB

Audited Financial Statement*

Please upload your organization's most recent audited financial statement. If you do not have an audited financial statement, please provide an explanation as to why your organization does not have one.

Character Limit: 1000 | File Size Limit: 9 MB

Additional Attachment (Optional)

If there is information related to your request that you feel is important for the Foundation to know but that you were not able to present in this application, you may describe or upload it here

Character Limit: 2500 | File Size Limit: 2 MB

Electronic Signature

Electronic Signature*

Prior to the release of any grant monies, a grant recipient will be required to sign a grant agreement to use funds for the sole purpose stated in the application form. Failure to comply with the terms of the grant agreement will jeopardize any future grants from the DuPage Foundation.

Enter your full name, business title and the date of submission. (e.g.: Erin Smith, Executive Director, March 1, 2022)

Character Limit: 250

By entering your information above and clicking "I agree" below, you are certifying that:

- 1. the information contained in this application is true and correct.
- 2. the proposed program/project has been adopted by your organization as a part of its plan of work.
- 3. you are duly authorized to submit this application, or you have uploaded a signature page of someone who is duly authorized to submit this application on behalf of your organization.

Your completion of this section constitutes an electronic signature.*

Choices

I agree

I do not agree