2023 DuPage Community Transformation Partnership Immediate Intervention Grant

DuPage Foundation

Basic Information

Project Name* Name of 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 do).

Character Limit: 250

Issue Area*

Indicate the area or areas of focus.

Choices

Food Insecurity Housing Instability Mental Health Substance Use Disorder

Program/Project Budget*

What is the total cost of the program/project for which you are applying? Character Limit: 20

Grant Amount Requested*

What is the amount you are requesting? Minimum request is \$20,000

Character Limit: 20

Narrative

Organization Description*

What is the overall purpose or mission of your organization? Include a brief history. Character Limit: 2500

2023 DuPage Community

Intervention Grant

DuPage Impact*

What percent of the population served by your **organization** are DuPage residents? If less than 50%, please specify the DuPage location from which services are delivered or provide a description of the DuPage advisory board and when it was created.

Character Limit: 250

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

Character Limit: 250

Description of Need*

Provide a brief description of the impact COVID-19 has had on your organization and the responding need relative to the program for which you are seeking funding.

Character Limit: 1000

Program Description*

Provide a description of the proposed program, how it will support the immediate needs of individuals impacted as a result of the COVID-19 pandemic or the economic downturn, and a general description of who will be served.

Character Limit: 1000

Fund Allocation*

Describe how you plan to specifically allocate grant funds (i.e. salary expense, equipment purchase, emergency assistance, etc.). Bullet points are fine.

Character Limit: 500

Attachments

Financial Indicators Form*

Download the <u>Financial Indicators Form</u>. The fiscal years reported on this form must align with the 990 form and audits submitted. You will need to complete and save the form before uploading it below.

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: 1 MB*

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Audited Financial Statements*

Please upload your organization's two most recent comparative audited financial statements conducted by an independent audit firm.

File Size Limit: 8 MB

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File Size Limit: 8 MB

Additional Attachment (Optional)

If there is information to your request that you feel is important for the Evaluation Team to know but that you were not able to present in this LOI, you may describe or upload it here. *Character Limit: 1000 | File Size Limit: 2 MB*

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 purposed 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 date of submission (e.g. Erin Smith, Executive Director, March 1, 2023)*

Character Limit: 250

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

1. the information contained in this LOI 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 LOI.

Your completion of this section constitutes an electronic signature.*

Choices I agree I do not agree