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Guidelines and Grant Application

# **Program Partners and Funders**

The **Community Foundation for Northern Virginia** and **Community Foundation for Loudoun and Northern Fauquier Counties** have partnered to offer charitable funding opportunities to qualifying organizations serving Loudoun County through the Loudoun Impact Fund.

The Loudoun Impact Fund is a giving circle of caring donors, each offering gifts of $1,000 (per person) or $5,000 (per foundation or corporation). Gifts are pooled together to leverage funding and offer grants with impact, here at home. Many members are new to grantmaking and look forward to learning more about programs, needs, and solutions in Loudoun County.

## **Loudoun Impact Fund Guidelines ~ 2017**

The Community Foundation’s giving-circle grant advisors will consider applications that positively impact Youth and Elderly Welfare in Loudoun County. Proposed projects should some or all of the following:

* Address disadvantaged children and young adults up to 24 or disadvantaged elders 60 or over with low incomes, special needs, disabilities or related life risks,
* Provide services enhancing health and welfare such as daycare, home care, respite care, medical care, after-school care, athletic and exercise programs, or social programs designed to enhance individual and community wellbeing.

# **Grantmaking Priorities**

* Projects that leverage additional resources, such as volunteer time, in-kind gifts of materials or supplies, matching support from other funding sources, and collaboration with additional groups.

# **Who is Eligible to Apply?**

Loudoun Impact Fund applicants may be area 501(c)(3) public charities / nonprofits, schools, and churches providing direct services to residents of Loudoun County. (NOTE: The Loudoun Impact Fund can support faith-based entities, however, it will not support projects that either provide or require religious teachings or exclude citizens of different faiths.

# **Application Deadlines and Reviews**

Applications must be **submitted electronically on or before September 13, 2017, midnight.**

##### **Grant Size, Announcement, Final Reporting**

Grants are expected to range from **$5,000 to $30,000 per agency.** An estimated $125,000 will be available for distribution (it is anticipated that 1 or 2 large grants will be awarded; a majority of grants will be in the $10,000 range or less). Grants will be announced no later than October 13, 2017. Grantees will be invited to attend an evening grantee & donor reception planned for November 1, 2017.

A final report of accomplishment and summary of grant expenses must be provided to the **Community Foundation for Loudoun and Northern Fauquier Counties** by August 15, 2018. Extensions may be allowed, but must be approved in writing in advance.

### Application Instructions

An application should include the following components:

1. Application Cover Form
2. Your proposal, no more than four pages total.
	* Organizational Background—When founded, board composition, staffing and volunteer systems, *etc*.
	* Statement of Need—What need does your project address? What population(s) served?
	* Project Description—How will your project uniquely address this need? Where will the project take place? How many are involved in the project? What are their roles? Who are your project partners? Do you have any experience with this project or similar projects? How did that go? Explain volunteer and staff involvement in your program
	* Goals and Objectives—provide us with the your Big Picture Goals, but also your specific measurable results that you intend to accomplish
	* Summarize your timeline for the work
	* Evaluation and Future Funding—How will you measure success? How will you publicize your grant and project outcomes? Will this project continue in the future? If so, how funded?
	* Budget Narrative—Provide us with enough detail to assure our understanding of each component of income (including detail about other funders) and expenses cited
3. Application Budget Form—NOTE: Use this form for the PROJECT for which you seek funding. Your income and expenses should **equal**. List other sources of funding sought, pledged, or received for your program or project; include donated materials and/or volunteer time. You may increase the budget layout to two pages, if needed, but please retain this formatting.

### (4) Support Materials—Please provide a copy of the following materials, unless they are on file at CFLNFC for your current fiscal year:

* List of board of directors and their background
* Most recent Form 990 or 990EZ
* Most recent audit or financial statement
* IRS letter of determination
* Current Fiscal Year Organizational budget (use the attached form for your PROJECT budget)
* Listing of all foundation and corporate gifts for past two years
* Copies of your policies addressing background checks of staff and volunteers working with your clientele

***Apply electronically by September 13, 2017 to:***

**Community Foundation for Loudoun and Northern Fauquier Counties**

Community Foundation **amy@communityfoundationlf.org**

Subject: Loudoun Impact Fund Application For more information, call Amy Owen at **(703) 779-3505**

**Loudoun Impact Fund Grant Application COVER ~ 2017**

Organization \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Project Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Contact Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount Requested $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Proposal request summary (**please use the space provided**) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Total estimated number of youth and/or elderly directly aided in this program \_\_\_\_\_\_\_\_\_\_\_\_

When will your program begin? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ End? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is this a new project or an on-going program? \_\_\_\_\_\_\_\_If the latter, how many years has this program been running. \_\_\_\_\_\_\_

If your organization has received a Loudoun Impact Fund grant(s) in the past please add the amounts:

2014 $ \_\_\_\_\_\_\_\_\_\_\_\_\_ 2015 $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2016 $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What percentage of your board make financial contributions to your organization? \_\_\_\_\_\_\_\_\_\_\_\_\_

Copies of this form must be included with your proposal narrative, budget form,\* and required supporting materials.

\* Be thoughtful about your budget submission. Our advisor grant-makers often spend quite a lot of time scrutinizing your other income sources and project expenses. Your budget should balance. Many of our grant applicants have questions about preparing the budget. Feel free to call us at (703) 779-3505 to ask questions.

**Loudoun Impact Fund Application BUDGET ~ 2017**

**Budget PROJECT TITLE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Fill in or *change* all line items, providing descriptions for each line item, if necessary.

|  |  |
| --- | --- |
|  **Expense Items:** | **Budget** |
| Equipment |   |
| Personnel Costs |   |
| Supplies |   |
| Transportation |   |
| Volunteer time (use the IRS figure of $24.14 per hour!) |   |
| Other |  |
| ***Total Expenses*** | $  |

|  |  |
| --- | --- |
|  **Income Sources:** | **Budget** |
| Loudoun Impact Fund Amount Requested |   |
| Volunteer time (to get your budget to balance, it has to show up both as *income & expense*) |   |
| Other funding source(s) (explain in narrative, if necessary) |   |
| ***Total Income (must equal Total Expenses)*** |  $  |