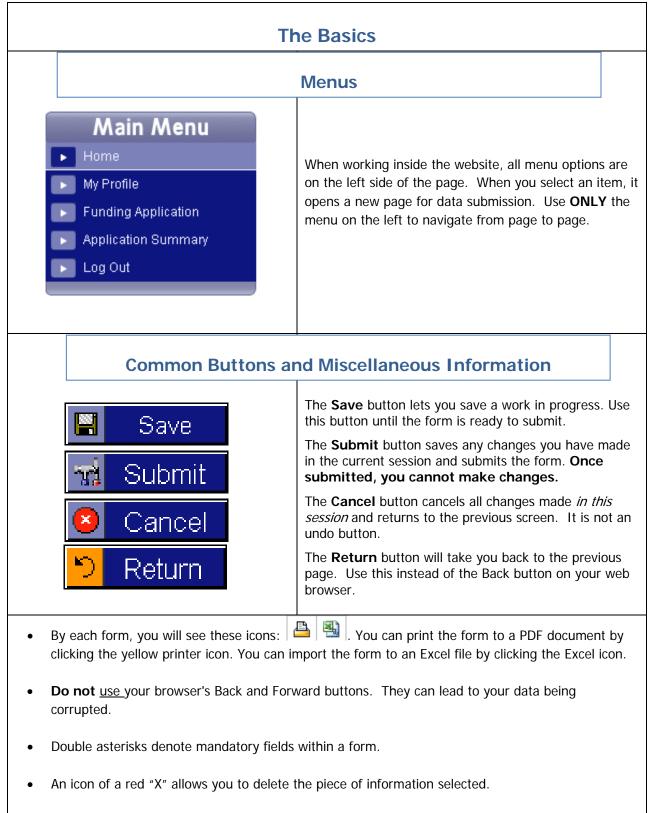


# LARGE GRANT Online Application User Guide

Version 1: September 2017



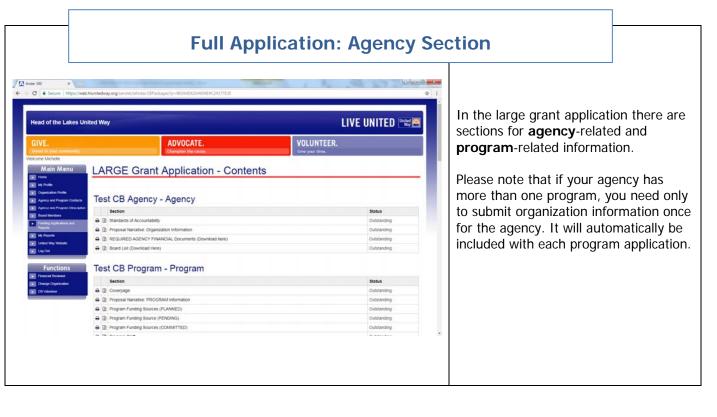
• When you are finished with a session, don't forget to **Log Out** of the system.

Head of the Lakes United Way	2
Online Application – User Guide	

Getting Started		
ADVOCATE.       VOLUNTEER.         Champion the cause.       Give your time.         User ID:	Log into the site usin user ID, and passwor via e-mail. The URL https://web.hlunitedv If you forget your pa click on the <b>Forgot F</b> button and enter the address related to yo – the password will b email.	rd provided is way.org ssword, Password email ur account
Change Password Your password has expired, please enter a new password below: Enter New Password: Re-enter New Password: Enter Password Hint: Save Save Cancel	New users are promp change the password password twice. Ente desired. Then click <b>S</b>	l. Enter the r a <b>Hint</b> , if

GIVE. Invost in your community. Welcome Michelle Main Menu My Profile My Profile My Profile My Profile Agency and Program Contacts Agency and Program Description Board Members Funding Applications and Reports My Reports My Reports United Way Website Log Out	Head of the La Hello Michelle, Welcome!! You are logged into the I hand menu. Please note: the full ap please visit: http://hlunitedway.org/o	Head of the Lakes United Way onli plication will be available online sta	After a successful log-in, a <b>Welcome</b> screen with a message personalized to the organization will appear. A navigation menu is available to
<ul> <li>Home</li> <li>My Profile</li> <li>Organization Profile</li> <li>Agency and Program Contacts</li> <li>Agency and Program Description</li> <li>Board Members</li> <li>Funding Applications and Reports</li> <li>My Reports</li> <li>United Way Website</li> <li>Log Out</li> </ul> Functions Change Organization		First Michelle Middle	Click on <b>My Profile</b> in the menu to the left. This will contain information from the user's personal account. Please review and make sure the data is correct. To change your password, click on the icon to the right of the password field.

Applica	tior	า		The <b>Funding Applications</b> page
Due Date			Description	includes all the application packages that are open: large grant & small grant.
Nov 20, 2017	₽	x	LARGE Grant Application	Please select and complete the appropriate package for your request.
Nov 20, 2017	₽	x	SMALL Grant Application	
Jun 19, 2014	₽	x	Test	The due date indicates the date by
Nov 25, 2013	₽	x	Full Application: Basic Human Services	which the package is due.
Nov 25, 2013	₽	x	Full Application: Education	The status will show as <b>outstanding</b>
Sep 30, 2013	₽	x	Pre-Application	until all elements have been completed.
				Users can print the entire package of information from this screen by clicking the printer icon.



C Secure https://w	eb.hlunitedway.org/servlet/eAndar.CBPackageDtl?p=4B3A4D6264604E4C24377E3E&d=5F2C	
My Reports	Standards of Accountability	
United Way Website	The Head of the Lakes United Way (HLUW) Standards of Accountability listed below	COMPLETE THIS SECTION FIRST
Functions	<ol> <li>The organization has tax-exempt status under IRS code 501(c)(3) and is provide written proof of tax-exempt status as a government entity.</li> </ol>	Please review each statement carefully and ensure your organization
Change Organization CB Volunteer	<ol> <li>The organization agrees to understand and comply with all applicable fed practices.</li> </ol>	is in compliance. If you are not able to meet one of
	3. Agencies which are statutorily required under State of Minnesota, State c attach to this application a copy of their most recent audited financial stater audit performed by an independent Certified Public Accountant (CPA), are required to their agency. The narrative should include the processes in place to assure that agen Accepted Accounting Principles, and are free of material misstatement. The narrative level. Please indicate whether your Board has a member who is a CPA. Any agency 1 review to this application. Agencies required to file IRS Form 990 or IRS Form 990-E; classified as charitable organizations are required to include their current IRS determ	these factors, STOP and do not proceed with the full application. Contact Michelle Hargrave at HLUW to consult before continuing.

		Cover Page		
Name of Pr	GRAM Request Information rogram: *  h/program Contact Name: *		Please complete the cover page ensure all contact information The program contact listed is we will contact with any applic questions.	is correct. the person

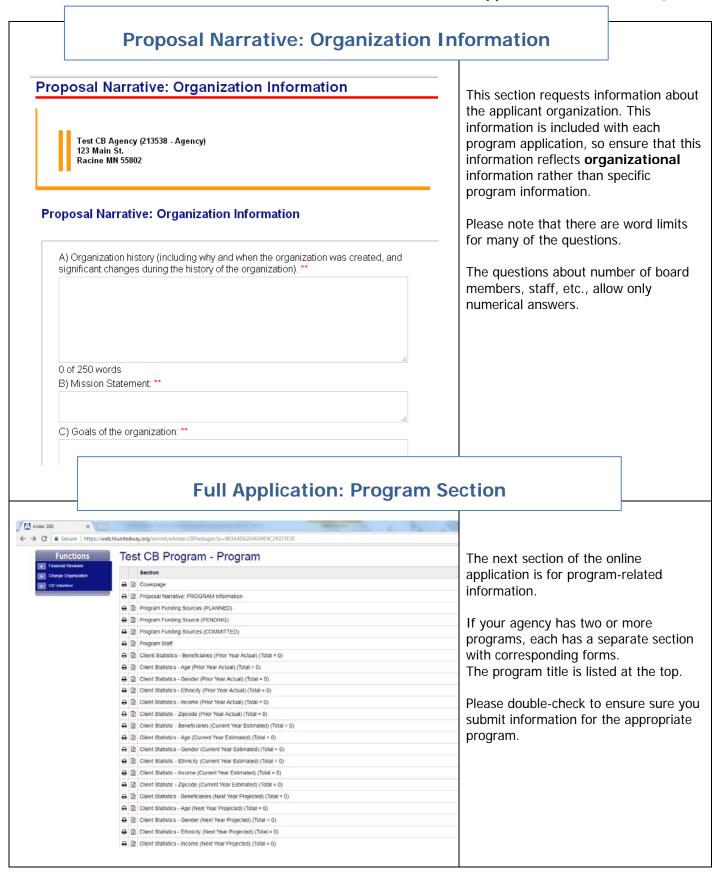
## **Uploading Documents**

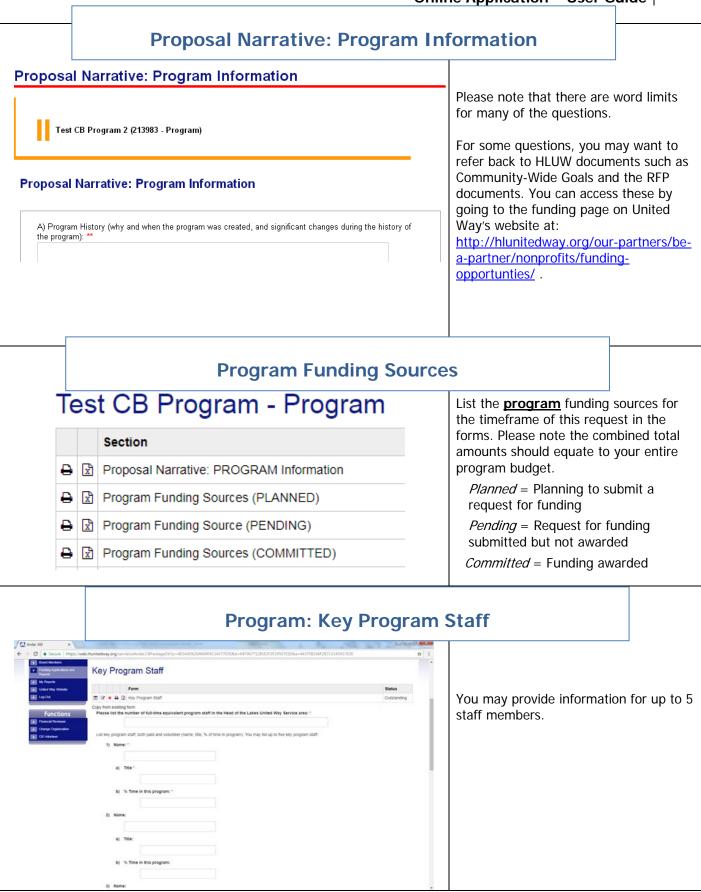
ad of the Lakes United Way				
VE. M to your community:	ADVOCATE. Champion the case.	VOLUNTEER Gres your time.		
Main Menu REQU	JIRED AGENCY FINANCI	AL Documents (Do	wnload here)	
gency and Program Contacts gency and Program Description hand Maniform hand Maniform hepatiti	CB Agency (213535 - Agency) Man St. ne MN 55802			_
autod Wey Westwale HLUW require	nents Summary is several documents to be uploaded to complete the grant application uments, click the Add button to upload the appropriate documents. T	in process. Please review the checklist carefully a The required checklist of documents are as follow	is the Financial Requirements have chang	ped.
	& FINANCIAL DOCUMENTS REQUIRED:	99 - 19 - 19 - 19 - 19 - 19 - 19 - 19 -	713 	
Perge Organization B Mitchese Organiz	zation budgets for prior year actual, current year estimated and in g income and expenses, using your agency's existing budget format.	next year projected.		
includin significar	g income and expenses, using your agency's existing budget format ( it (+ or = 10%) financial change in the past year, please attach a budget narrotive	(if your organization has had a		
Agencie	cent audited Financial Statement, including opinion and manage is which are statutory, required under State of Manesiota, State of W no reoutations to have an annual audit, are reoured to attach to this a	ement letters.		
Agencie	is which are statutorily required under State of Minnesota, State of W	ement letters.		
OAD PAGE: ections: Please uplo	is which are statutorily required under State of Minnesota, State of W	exert laters. Incomat, or other coexcation a creat of their	document in the 'De	ocument
OAD PAGE: ections: Please uplo coription' text box. Y	a uter are statutory request under State of Manescut. State of W re recutions to have an annual add, are recurred to attach to the of add each document one at a time 'ou may ignore the effective and	exert laters. Incomat, or other coexcation a creat of their	document in the 'D	ocument
OAD PAGE: ections: Please uplo scription' text box. Y	a whom are statutory regards under 50 de of three-out, 50 de of to receivables to have an annual audi, are required to attach to the of add each document one at a time 'ou may ignore the effective and 2014	exert laters. Incomat, or other coexcation a creat of their	document in the 'D	ocument
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COAD PAGE: ections: Please uplo cription' text box. Y ar ass pe cument Description	ad each document one at a time for resultions to have an annual add, are required to diach to the or our may ignore the effective and 2014 Financial Document	exert laters. Incomat, or other coexcation a creat of their	document in the 'Do	ocument

There are two sections where you can upload documents – one for agencyelated documents, and one for program-related documents. Please refer o the document submission checklist isted on the summary page and as the inal element of your program section to complete to ensure you have uploaded he correct documents.

To upload a document, Press the **Add** button on the summary page, which will take you to an upload page where you can upload the document and give it a description.

Please do not click **Submit** on the main summary page until **ALL** documents in that section have been uploaded.





			Client Statistics	
×			The sum of the last supervise these pro-	There
https://we	b <mark>.hlun</mark> ite	dwa	y.org/servlet/eAndar.CBPackages?p=4B3A4D6264604E4C24377E3E	Statis
	•		Cliient Statistics - Beneficiaries (Prior Year Actual) (Total = 0)	
	0	x	Client Statistics - Age (Prior Year Actual) (Total = 0)	type o differe
	0	R	Client Statistics - Gender (Prior Year Actual) (Total = 0)	softwa
	0	R	Client Statistics - Ethnicity (Prior Year Actual) (Total = 0)	should
	Ð	R	Client Statistics - Income (Prior Year Actual) (Total = 0)	from t
	₽	x	Client Statistic - Zipcode (Prior Year Actual) (Total = 0)	next s
	₽	x	Client Statistic - Beneficiaries (Current Year Estimated) (Total = 0)	numbe
	₽	x	Client Statistics - Age (Current Year Estimated) (Total = 0)	year a your p
	0	x	Client Statistics - Gender (Current Year Estimated) (Total = 0)	Jourp
	0	R	Client Statistic - Ethnicity (Current Year Estimated) (Total = 0)	

Remember: The total number at the bottom of this form MUST equal the totals given for the other forms from the same year. Do not submit any forms until you are sure that the totals are equal on each form. Submission will not be possible if the totals given are not equal.

A

Number	Group
0	Preschool (0-5)
8	Children (ages 6-11)
0	Youth (ages 12-14)
0	Youth (ages 15-18)
0	Adults (19-64)
0	Seniors (65+)
0	Unspecified
8	Total
	Total

are a total of **18 Client** ics forms across 6 ries – this is because each demographic requires a nt form on the application e. The first six forms reflect actual numbers e prior fiscal year. The x forms are estimated rs for the current fiscal nd the last 6 forms are ojected numbers.

note: All Client Statistics forms must equal the total number served by the program. Once you have completed the total beneficiaries form, every other form should equal the total beneficiaries form, or users will be asked to correct the client statistics form(s). Do not click Submit until all forms have been completed.

This rule does not apply to the income forms, since you can track either by household or individual.

## **Program Information for UW Marketing**

Program Information for UW Marketing
Test CB Program (213546 - Program)
Client Stories
Please submit up to three examples of services provided by the program that a weekly contribution of \$X dollars would make possible (i.e., \$6 per week for one year shelters and feeds a family of four for four days). This information may be used for marketing during United Way's annual Campaign. 1. **
Helping kids read

UW will use this information about your program services in United Way's annual fundraising campaign.

			Metrics & Evaluation
₽	x	Program Outcomes (Prior Year)	
₽	x	Program Outcomes (Current Year Estima	ted) Please complete the 9 metric forms across the prior, current and prosposed years that
₽	x	Program Outcomes (Next Year Proposed	will comprise your logic model and will be
₽	x	Program Activities (Prior Year Actual)	able to track the data from year to year to gauge progress and changes.
₽	x	Program Activities (Current Year)	Please ONLY select ONE Community
₽	x	Program Activities (Next Year Proposed)	Outcome. Applicants can ONLY apply
₽	x	Program Outputs/Indicators (Prior Year A	
₽	x	Program Outputs/Indicators (Current Yea	r Estimated) Outcome/Impact Area you will be asked to select the corresponding outcome indicato
₽	R	Brogram Outputs/Indicators (Novt Year B	
		Program Outputs/Indicators (Next Year P	etion Checklist
		Completion Checklist	As the <b>FINAL</b> Step in the application
arge	e G	Completion Checklist	As the <b>FINAL</b> Step in the application process, please complete the checklist. The second sec
arge A	e G	Completion Checklist	As the <b>FINAL</b> Step in the application process, please complete the checklist. Th is an aid to ensure all elements were completed and all documents attached to
arge A	e G	Completion         rant Completion Checklist         Form         2       Large Grant Completion Checklist         tion for Funding Checklist: Please ensure your application	As the <b>FINAL</b> Step in the application process, please complete the checklist. Th is an aid to ensure all elements were completed and all documents attached to
arge A	e G pplica pplica AGE	Completion Checklist         Form         2       Large Grant Completion Checklist         2       Large Grant Completion Checklist	As the <b>FINAL</b> Step in the application process, please complete the checklist. Th is an aid to ensure all elements were completed and all documents attached to
arge A	e G pplica pplica AGE	Form <sup>2</sup> Large Grant Completion Checklist          tion for Funding Checklist: Please ensure your application         he agency financial review information once.         NCY & FINANCIAL Information Checklist:	As the <b>FINAL</b> Step in the application process, please complete the checklist. Th is an aid to ensure all elements were completed and all documents attached to
arge A	P G Pplica pplica omit th AGE 1)	Completion Checklist         rant Completion Checklist         Large Grant Completion Checklist         tion for Funding Checklist: Please ensure your application agency financial review information once.         NCY & FINANCIAL Information Checklist:         Standards of Accountability	As the <b>FINAL</b> Step in the application process, please complete the checklist. This an aid to ensure all elements were completed and all documents attached to the application.

## **Summary Reports**

Once the pre	eapplication an	ummary Reports and application are available online and nts of your application by viewing a a			e forms,	you maj	y	<b>Summary Reports</b> allows the user to create, print and/or save a complete PDF summary of all of the information submitted for the agency and program. The report
Summary Re	eports - to view it.) If you do ni	e which application to review, then pre , click on the summary name (if you : ot see the summary immediately app	are using Chrome, you may	need to r	ight-clic	k and sa	ave in	will include all online forms, and will include a list of uploaded documents.
application.	Full Application Includes all form Pre-Application Includes all form nit	ns and list of uploaded documents with ns and list of uploaded documents with	in application	ıy original	informat	ion from	the	To print a summary, click on the application you wish to print and press <b>Submit</b> . Click <b>Refresh</b> to check status. When status is <b>Ready</b> , click on the underlined name and a PDF document will open. Save a copy of this summary to your desktop and/or print. Summary reports are routinely deleted from the system after 30 days. Users can
Mye	LI DO DO OP	V REDORIS						recreate the summary again it it was
	ummar							recreate the summary again if it was deleted from <b>My Summary Reports</b> .
My S	esh	Name	Date	#Pages	Size	Туре	Stat	deleted from <b>My Summary Reports</b> . Deleting a summary document does not
<ul> <li>Refre</li> <li>Joi</li> </ul>	esh		Date 08/09/2013 10:11:28 AM	#Pages			Stat Rea	deleted from <b>My Summary Reports</b> . Deleting a summary document does not delete the original information in the

### **Questions or Problems?**

#### Application content and methodology Questions Contact:

Michelle Hargrave <u>mhargrave@hlunitedway.org</u> or 218.726.4771

#### Technical Questions on the online Platform Contact: