# **Head of the Lake United Way Community Investment Grant Application**

Use this word document as a tool to help draft your grant application, once everything is your

complete, copy and past what you have written into the final application. When writing y grant remember, these will be reviewed and evaluated by members of your community. They may not have a familiarity with your organization, programming, industry specific language or acronyms. There are no character limits with the application so please spell out and define acronyms as you use them and provide a background where needed.
ORGANIZATION INFORMATION Full Legal Organization Name:
Program Name (Name of the specific program applying for funding):
Organization Leader Name: Organization Leader Title: Organization Leader Phone: Organization Leader Email:
Is the organizational leader also the best contact for this grant? Yes/No
Primary Grant Contact Name: Primary Grant Contact Title: Primary Grant Contact Phone: Primary Grant Contact Email:
Program Mailing Address: City, State, Zip:
Organization Website:
Organization Mission:
Does your organization have an EIN (Employer Identification Number)? Yes/No Yes, please enter your EIN: No, please explain below:
Geographic Area Applying For:

Geographic Area Applying For: Ashland & Bayfield Counties Greater Duluth

Lake & Cook Counties
Superior-Douglas County

### Amount Requesting:

These are the fund ranges for each geographic area. The amounts are based on funds available for the region and past award amounts.

Ashland & Bayfield Counties \$2,500 - \$12,000 Greater Duluth \$2,500 - \$40,000 Lake & Cook Counties \$2,500 - \$8,000 Superior-Douglas County \$2,500 - \$20,000

Primary Impact Area(s)
□ Health
$\square$ Education
☐ Financial Stability

#### **ABOUT YOUR IMPACT**

Please share the most important information about your impact with this program.

Most people write about 3 – 5 paragraphs or about 2,000 characters. Note to applicant:

Briefly, please explain what success looks like overall and for any goals stated, above. How do you track impact and how do you know you're moving toward it?

#### **ABOUT YOUR COMMUNITY**

Please share the most important information about your community. Specifically highlight how this programming will positively benefit the geographic area you are applying for. What does your presence in that region look like?

Most people write about 3 – 5 paragraphs or about 2,000 characters. Note to applicant: Please share information about the community where, or with whom, you do your work. Relevant information could include some of the following:

- The community opportunity, challenge, issue or need that your organization works to address
- Information about the people you serve such as socioeconomic status, race, ethnicity, gender, sexual orientation, age, physical ability, and language
- Details about how you work with other organizations, coalitions, or networks

 Details about how you listen to/involve constituents, community members, and/or volunteers

#### **ABOUT YOUR PROGRAM**

Please share the most important information about your program/project.

Most people write about 3 – 5 paragraphs or about 2,000 characters. Note to applicant: Please explain the program/project. It is not necessary to restate information answered above. Relevant information could include some of the following:

- What you plan to do (activities) and the timeframe
- Why you plan to do it (opportunity, challenge, issue or need)
- Who will be impacted (target population, including age, gender, ethnicity, other relevant characteristics)

#### ALIGNMENT TO HLUW MISSION AND VALUES

Please share about how you serve individuals and families who are experiencing ALICE. Most people write about 1 – 3 paragraphs or about 1,000 characters. Learn more about ALICE here: https://www.unitedforalice.org/

Please explain how this request aligns within HLUW's Impact Areas of Health, Education and/or Financial Stability.

Most people write about 1 – 3 paragraphs or about 1,000 characters.

#### **PROGRAM BUDGET**

Please upload an annual budget for your program. Please include the entire cost, not just the funds that you are requesting.

Note to applicant: we want to see the true cost of this program to your agency, please also include any overhead costs that co-occur with this program.

Please include a narrative on how funding will be used throughout the grant period and the impact of receiving this grant on your program budget.

Note to applicant: not every reviewer will have a background in reviewing budget documents. This narrative is to help them better understand the background and purpose of your funding.

## **AGENCY FINANCIALS**

Please upload your current agency fiscal year budget

Please upload your most recent audit

