

# **COLUMBUS AREA UNITED WAY COMMUNITY IMPACT GRANTS GUIDELINES AND APPLICATION**



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## TABLE OF CONTENTS

	Page
Purpose.....	3
Criteria for Eligibility .....	4
Application Guidelines/Timetable .....	5
Application Cover Sheet.....	6
General Information.....	7
Outcomes .....	8
Proposed Budget.....	9

## PURPOSE

The purpose of the Community Impact Grant program is to provide health and human service agencies and organizations an opportunity to seek funds for immediate and creative responses to the most pressing human needs in the areas of Education, Income and Health. Community Impact Grants can be applied for in two different areas.

1. One year demonstration or pilot project grant: Organizations are encouraged to test and develop new or improved ways of delivering needed services, services which address emerging or newly identified needs, or services which respond to previously unmet or undeserved needs within the Columbus area. The desired results of these demonstration/pilot programs will be improved delivery or services for persons in need, and a stronger more integrated human service network in our community.

2. Impact Grants: Organizations that already have programs established that are addressing recognized concerns within the broad areas of Education, Income and Health. The objective of these impact grants will be to fund programs that will have measurable results that improve lives and make lasting change.

The considerations for these grants include:

- Programs which provide services in response to community identified needs.
- Programs which respond to new and/or emerging needs.
- Programs which utilize the Impact Grant as matching funds to secure other grants for provision of human services.
- Programs that will secure other funds, either grant or direct contributions, plus in-kind matching support.
- Proposals which document shared staff facilities and/or resources among two or more agencies, organizations, joint agency-business, or joint agency-government proposals. Special consideration will be given to programs which demonstrate a collaborative effort among groups.
- Programs which demonstrate the ability to become self-sufficient after initial funding.
- Programs not duplicated by other services/programs currently available.
- Programs which make extensive use of volunteers.

## **CRITERIA FOR ELIGIBILITY**

- A. The applicant must be incorporated (or sponsored by an incorporated agency) as a non-profit human needs services agency/organization.
- B. The applicant must have tax exemption under Section 501(c)(3) of the Internal Revenue Code. Groups/organizations who are not incorporated or who do not yet have tax-exempt status must be sponsored by a non-profit, tax exempt organization and provide a signed statement showing sponsorship agreement (call the United Way office for information)
- C. The applicant's primary geographical area of service and physical location must be in the Columbus Area United Way service area (Platte, Colfax, Butler, Nance, Boone).
- D. The applicant must have a certificate of non-discrimination.
- E. The applicant must have an organized governing authority, comprised solely of volunteers, with responsibility to implement a program and to administer and be accountable for the dollars granted. The governing authority must represent the community which it seeks to serve, consist of a minimum of five (5) members and meet regularly.
- F. Requests for support must be consistent with the purpose of the Community Impact Grant Policy (see page 3).

The following are examples of items that will not be considered for Impact funding.

  - 1. Direct financial assistance to individuals or families.
  - 2. Capital expenditures unless there are matching monies or evidence of criteria need for the item for program services.
  - 3. Grants/stipends to conduct or attend conferences, seminars, and workshops.
  - 4. Audits
  - 5. Other items deemed inappropriate by the Columbus Area United Way Board of Directors.
- G. Impact Grant recipients will be allowed to seek extended funding beyond the first year for stabilization purposes. This does not, however, obligate the Fund Distribution Committee to fund the reapplication but only to consider its request. To be eligible for consideration for a second period of funding, the organization must meet the following criteria.
  - 1. All concerns (administrative, management, program, facility, financial, etc.) expressed by the Fund Distribution Committee at the time of first year's funding will have been addressed with positive, demonstrated results by the organization.
  - 2. Demonstrated effectiveness of the applicant's program in meeting the proposed community need;
  - 3. Consistency of second year proposal with initial goals and objectives of the first year.
  - 4. A clear and operable plan for generating other resources. Columbus Area United Way encourages applicants to avoid an over dependence on only a few fund raising sources.
  - 5. A financial/program report from the preceding year.
- H. Community Impact Grants will be considered on an annual basis.

## **APPLICATION GUIDELINES/TIMETABLE**

The application and approval procedure is as follows:

1. By May 1, 2018, applications will be made available and advertising begins.
2. The Columbus Area United Way will receive inquiries regarding Community Impact Grants.
3. In response to the inquiry, the Grant applications will be distributed to the applicant.
4. The applicant must submit the narrative application (see pages 6-9) in writing responding to the Community Impact Grant criteria.
5. Applications will be accepted postmarked no later than June 15 at 5:00 p.m. This includes those proposals sent by mail. Applications received after this date cannot be accepted.
6. The applications will be reviewed by the Fund Distribution Committee.
8. The review may include conferences and/or on-site visits with applicants as the Fund Distribution Committee deems necessary.
9. The review process will conclude with the Fund Distribution Committee making a recommendation to the United Way Board of Directors. The United Way Board of Directors will then make a final determination and announcement no later than their regularly scheduled August board meeting.
10. Notification of actions on requests will be given to applicants no later than August 9th.
11. Successful applicants may be invited to the Columbus Area United Way Board meeting for distribution of checks.
12. The above described time frame can be waived or altered at the discretion of the Board of Directors of the Columbus Area United Way.
13. Community Impact Grant funds will be distributed in one lump sum unless otherwise recommended by the Fund Distribution Committee.
14. A written report ( emailed to you) describing the progress of the applicant's program will be required six months and twelve months after the distribution of funds. The Fund Distribution Committee will review and monitor the Grant recipient as deemed necessary.

**COLUMBUS AREA UNITED WAY, INC.**  
**COMMUNITY IMPACT GRANT**  
**APPLICATION FOR FUNDING**

Cover Sheet

Date: \_\_\_\_\_

Organization \_\_\_\_\_

Address \_\_\_\_\_

Tax Exempt Number \_\_\_\_\_

(If your organization does not have its own tax exempt number contact the United Way to request a supplement sheet that will need to be filled out.)

Staff Contact Person \_\_\_\_\_

Title \_\_\_\_\_

Telephone \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_

**PROPOSAL SUMMARY**

Are you applying for a New Program / Pilot Program \_\_\_\_\_ or an Impact Grant \_\_\_\_\_

**Check One Focus Area** that best describes the program:

<input type="checkbox"/> <b>Education</b> (helping children & youth achieve their potential) Local United Way Goal: Increase to 95% the number of high school graduates planning to continue their education with post-secondary education, career certification or military training.
<input type="checkbox"/> <b>Income</b> (promoting financial stability & independence) Local United Way Goal: Reduce to 5% the number of families who are below poverty (families with related children under the age of 18).
<input type="checkbox"/> <b>Health</b> (improving people's health) Local United Way Goal: Increase the number of youth and adults who avoid risky behavior and are healthy by practicing safe sex/abstinence, are not overweight, do not abuse tobacco, drugs or alcohol and are not involved in violence.

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

Target Population (Describe specifically, i.e., Hispanic youth 15-19):

Name of Program:

Brief Description of Program:

## GENERAL INFORMATION

The Community Impact Grant Application is designed to simplify the process for both the applicant and Fund Distribution Committee. Please limit your responses to the questions to a total of **four** typed pages. Maximum of six pages will include the cover sheet and budget form.

The questions which must be answered are listed below. Please number and **RETYPE EACH QUESTION**( or complete online and print) and answer in order. Complete the application and return five copies to the Columbus Area United Way office.

### **FORMAT:**

**Cover sheet (form provided – page 6).**

**Questions to be answered: No more than 4 pages.**

1. Name of Program.
2. How does the program relate to one or more of the Impact Grant Focus Areas (Education, Income or Health) and will it impact the local United Way goal as stated on page 6?
3. How did you identify the need for the program?
4. Who are the program partners? (Who do you work with? Who is invested in this program? Do other agencies in the community offer a similar program?)
5. What is the purpose/objective of the program? (What do you propose to accomplish). Summarize what overall purpose for the program and how lives are better because of it.
6. How will you accomplish your stated objectives – what activities/methods will you use? Give an approximate time line for completing these objectives.
7. How will you evaluate the results of your program? How will you know if you have met your stated objective? (method i.e. survey)
8. If you are an Impact Grant recipient, how will you continue the program (if necessary) after the one-year Grant?

We will be asking you to complete a 6-month and 12-month report if awarded this grant. You will be asked to report on the following three questions. At this time, share with us the performance measures you will be reporting on, to show how your program will be successful.

<b>How much did we do?</b>	<b>How well did we do it?</b>
<p><i>Which of the following will you be reporting?</i></p> <p># of clients served</p> <p># of activities (ie. # of people trained, # of classes taught)</p>	<p><i>Select all that apply</i></p> <p>% Common Measures (workload ratio, staff turnover rate, staff morale, percent of staff fully trained, worker safety, unit cost, customer satisfaction: <i>Did we treat you well?</i>)</p> <p>% Activity-specific Measures (percent of actions timely and correct, percent customers completing activity, percent of actions meeting standards)</p>
<p style="text-align: center;"><b><u>Is anyone better off?</u></b></p> <p><i>Choose whichever measure(s) apply. To help answer this question: “If your program works really well, in what ways are your customer’s lives better?,” you can also consider: “If your service was terrible, how would it show up in the lives of your customers?” Once you answer the question you can delete the examples given.</i></p> <p style="text-align: center;"># and % increased skills/knowledge (ie. parenting skills)</p> <p style="text-align: center;"># and % changed attitude/opinion (Include customer satisfaction: <i>Did we help you with your problems?</i>)</p> <p style="text-align: center;"># and % modified behavior (ie. school attendance)</p> <p style="text-align: center;"># and % altered circumstance (ie. working, in stable housing)</p>	



## COMMUNITY IMPACT GRANT PROPOSED BUDGET

Describe budget for this proposal (program/project), not sponsoring organization

Revenue:

1. Columbus Area United Way	\$
2. Other Program Funds - *List Sources Individually	
<b><u>Total Support &amp; Revenue</u></b>	<b>\$</b>

\*Include grants, fee for services, fundraising, sales of materials, etc.

Expenses:

1. Personnel	\$
2. Administration (specific to this program or project)	
3. Office supplies	
4. Advertising and printing	
5. Travel	
6. Dues and subscriptions	
7. Occupancy/utilities	
8. Professional fees	
9. Equipment, etc. (specific to this program or project)	
10. (other)	
11. (other)	
<b><u>Total Expenses</u></b>	<b>\$</b>

Calculate percentage of United Way funding to the total program support & revenue \_\_\_\_\_