



# The Children's Guild

## F O U N D A T I O N

*Purpose and Passion for Children with Special Needs*

### GRANT APPLICATION

**Grants are dedicated for activities, programs, and projects which attain excellence, in concept and implementation, and service the needs and welfare of children with special needs (physical/learning/developmental disabilities) and their families.**

**Grant awards are restricted to nonprofit applicants with a 501 (c) (3) designation located in Western New York.**

**Consideration of all grant applications will include careful evaluation of the experience of the applicant and the applicant's commitment to excellence. To receive Foundation support, the applicant must present a well-managed plan, must exhibit financial controls and sound fiscal management, and must demonstrate the ability to efficiently operate the proposed grant program.**

#### **Background Information:**

Program or project title: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_ Web site: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

#### **Information about the Request:**

Date of application: \_\_\_\_\_ Amount requested: \$ \_\_\_\_\_

Type of Support (please check):

Project  General  Capacity Building  Technical Assistance  Sustaining  
 Start-up Costs  Equipment  Other \_\_\_\_\_

Focus Area of Funding (please check):

Healthcare  Education  Recreation  Other \_\_\_\_\_

What geographic area will be served? \_\_\_\_\_

Approx. number of children impacted: \_\_\_\_\_

Approx. number of parents and/or family members impacted: \_\_\_\_\_

Is this a new program for the organization?  yes  no

If yes, expected start date: \_\_\_\_\_

If no, date when project began: \_\_\_\_\_

Purpose of this request (summary should not exceed this space):

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Please attach a project narrative addressing the following points of information:

- Your history, mission and geographic focus
- Project objectives/Purpose of request (include a detailed summary of the proposed project)
- Why is this program unique? Why is it needed?
- Goals of the proposed work (immediate and long-range)
- Implementation plan to achieve the goals
- Impact on the population involved - what will have changed as a result of the grant? How will you measure this impact?
- Partners in the community that are also working on the same issues, and how you are coordinating your efforts with them
- Describe your plans for sustaining the program after the grant (funding and other sources)
- Funding sources and amounts applied for, received or committed
- Criteria and procedures that will be used to evaluate the proposed work; how will you know this project succeeded at the end of this grant? List at least three goals [measurable if applicable] for the project
- Principle staff that will be working on the program/project and their qualifications
- Recognition/publicity/naming opportunities that will be given to the Foundation

**Organizational Information:**

How long has the organization been in existence? \_\_\_\_\_

IRS 501 (c) (3) number: \_\_\_\_\_

How often does your board meet? \_\_\_\_\_

How many locations does your organization manage? \_\_\_\_\_

Number of paid staff: Full time \_\_\_\_\_ Part-time \_\_\_\_\_

Number of volunteers: \_\_\_\_\_

**Financial Information:**

Total income of organization (most recent fiscal year): \_\_\_\_\_

Total expenses of organization (most recent fiscal year): \_\_\_\_\_

For entire organization (most recent fiscal year):

Fund raising costs: \$ \_\_\_\_\_ % \_\_\_\_\_ Administrative costs: \$ \_\_\_\_\_ % \_\_\_\_\_

Date on which fiscal year begins: \_\_\_\_\_

Principal sources of funding for the organization during the last two years:

Earned income: \_\_\_\_\_% Government contracts/funding \_\_\_\_\_% United Way \_\_\_\_\_%

Individual contributions: \_\_\_\_\_% Foundations/Corporations: \_\_\_\_\_% Other: \_\_\_\_\_%

Total expenses budgeted for proposed project: \_\_\_\_\_

Amount raised for the proposed project to date: \_\_\_\_\_

Previous funding from TCG Foundation? ( ) yes ( ) no

If yes: Amount(s): \_\_\_\_\_

Year(s): \_\_\_\_\_

Project Titles: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Funding from other funders for the proposed project:

Name	Current Amount	Prior Year Amount
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**Please include the following documentation in the order stated below to comprise each **Grant Application Packet**:**

- Grant Application
- A detailed budget for the proposed project including income and expenses
- If an existing program, financial statements of the project for the past two years
- If an existing program, current year's operating budget for the program
- Brief description of the history and mission of the organization
- Description of current programs, including program goals and persons served
- 501(c) (3) Determination Letter
- A list of the board of directors and officers including affiliations
- Current year's operating budget of the organization
- Current year's interim year to date financial statements of the organization
- Audited financial statements of the organization for the past two years
- A letter from your chief executive officer/board chair stating the organization's support for the application

**Send 14 paper copies (NO STAPLES PLEASE)** of the **Grant Application Packet** plus any significant materials, newsletters, brochures, articles, etc. relating to the project and/or your organization to the Foundation's address:

The Children's Guild Foundation  
726 Exchange St., Suite 1016  
Buffalo, NY 14210

~ and ~

Send electronically (via email) **the full grant application packet** to:

[ckollmar@thechildrensguild.org](mailto:ckollmar@thechildrensguild.org)

Please address any questions to: Catherine A. Gura, President

716-362-9650

[cgura@thechildrensguild.org](mailto:cgura@thechildrensguild.org)