

**THE CHILDREN'S GUILD FOUNDATION, INC.
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):

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: _____

Please attach the following documentation:

- A copy of the organization's 501 (c) (3) determination letter
- A list of your board of directors and officers

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 attach the following documentation:

- Current year's operating budget of the organization
- Current year's interim year to date financial statements of the organization
- 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
- 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

13 paper copies (NO STAPLES PLEASE) of the application with the required attachments plus any significant materials, newsletters, brochures, articles, etc. relating to the project and/or your organization to the Foundation offices:

The Children's Guild Foundation
737 Delaware Ave. Suite 215
Buffalo, NY 14209

Send electronically (via email) **the application with the required attachments only** to:
ckollmar@thechildrensguild.org

Please address any questions to: Catherine A. Gura, President
716-362-9650
cgura@thechildrensguild.org