Strategic Grants--Small

Marie C. & Joseph C. Wilson Foundation

Basic Information

Project Name*
Name of Project.
Character Limit: 100

Amount Requested*
Character Limit: 20

Total Budget*
Total project budget. If this is a general operating request, then include the total organizational budget amount instead.
Character Limit: 20

Population Served*

Choices
Children and Youth
Families
General Public/Not Specified
Homeless
Immigrants and Migrants
Low Income
Military/Veterans
Offenders/Ex-offenders
People with Disabilities
Substance Use
Unemployed/Underemployed

Program Area*

Choices
Arts and Culture
Community and Economic Development
Education
Health
Housing Development
Human Services
Mental/Behavioral Health
Shelter Support and Services
Project Information

How will your work and this grant contribute to reducing the impacts of trauma and housing instability for youth and families?*

Character Limit: 5000

Of the four areas of the strategic framework, explain under which category (capacity building, collaboration, prevention, advocacy) this request falls, and what you plan to accomplish with the funding.*

Character Limit: 5000

Who is the target population for the overall organization, and if applicable and different, for this request? How will you ensure their buy-in? (if this is for internal funding, please include staff buy-in)*

Character Limit: 2500

Organization Information

Budget*
Provide last year's actual and current year's budget

File Size Limit: 5 MB

Financials*
Provide the most recent audited financial statement. If none exists, please provide the most recent 990. If these sources are already online, either your website on Guidestar, please forgo the attachment and provide a link.

Character Limit: 250 | File Size Limit: 5 MB

Board*
List your board and their professional affiliations.

Character Limit: 500 | File Size Limit: 5 MB
Strategic Grants--Large

Basic Information

Project Name*
Name of Project.
Character Limit: 100

Amount Requested*
Character Limit: 20

Total Budget*
Total project budget. If this is a general operating request, then include the total organizational budget amount instead.
Character Limit: 20

Population Served*
Choices
Children and Youth
Families
General Public/Not Specified
Homeless
Immigrants and Migrants
Low Income
Military/Veterans
Offenders/Ex-offenders
People with Disabilities
Substance Use
Unemployed/Underemployed

Program Area*
Choices
Arts and Culture
Community and Economic Development
Education
Health
Housing Development
Human Services
Mental/Behavioral Health
Shelter Support and Services
In what area does your request most closely align?*
If appropriate, you may choose more than one option. There are specific questions related only to your chosen area(s) later in the application. For example, if you select Capacity Building, you will not answer questions about Advocacy.

**Choices**
Capacity Building
Collaboration
Prevention
Advocacy

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**Project Information**

How will your work and this grant contribute to reducing the impacts of trauma and housing instability for youth and families?*

*Character Limit: 5000*

How will this grant help your organization make the lives of your constituents better?*

*Character Limit: 2500*

Explain the desired indicators, outputs and outcomes for the grant. Also include how indicators are collected. What research—or if not research-based, what theory of change—supports your belief that the desired outcomes will be achieved?*

*Character Limit: 5000*

Who is the target population for the overall organization, and if applicable and different, for this request? How will you ensure their buy-in? (If this is for internal funding, please include staff buy-in.)*

*Character Limit: 2500*

What partners are critical to your work?*

*Character Limit: 2500*

How is your organization contributing to initiatives like RMAPI, ROC the Future, Systems Integration and/or All Kids Thrive? Elaborate, if able, on implementing strategies relating to the RMAPI guiding principles.*

*Character Limit: 5000*

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**Capacity Building**

Explain the need for capacity building specific to this funding request?*

*Character Limit: 5000*
How will it be delivered and what is the strategy to embed it into the organization? Include any outside consultants and resources*

*Character Limit: 5000*

How will capacity building contribute to your organization’s success? And client success?*

*Character Limit: 5000*

How do you grow leaders, both internal to your organization, and external with your constituents?*

*Character Limit: 5000*

**Collaboration**

If this is for a new collaboration, explain the partners, the intended goals and how you will reach those goals.*

*Character Limit: 5000*

If this is to participate in an existing collaboration, explain how the funds will be used and why the collaboration is important to your organization and clients.*

*Character Limit: 5000*

Explain if this request is for another form of participation in a collaborative process.*

*Character Limit: 5000*

**Prevention**

If this grant is for program expansion, has there been a third-party evaluation of the program? If this is for implementing a new program, why have you chosen this program and what feedback did you receive on it from clients? Has the program been previously evaluated in another community or organization?*

*Character Limit: 5000*

What barriers exist that prohibit successful implementation, expansion and/or assessment that this funding can break down?*

*Character Limit: 5000*

If this request includes implementing client-level assessment, explain why these assessments have been chosen and how the results will positively impact services to the client.*

*Character Limit: 5000*
Advocacy

If your organization works in advocacy, how is that done and how are your clients included in the process?*

*Character Limit: 5000

How will this effort increase coordinated care for clients across agencies? If this request also includes technical assistance or data design, explain how it will be implemented and sustained.*

*Character Limit: 5000

If this request includes public awareness, explain the details of the campaign, the buy-in and the goals. How will you determine success?*

*Character Limit: 5000

Organization Information

How is leadership supporting this request?*

*Character Limit: 2500

How is the community you serve represented in your organization?*

*Character Limit: 2500

Budget*

Provide last year's actual and current year's budget

*File Size Limit: 5 MB

Financials*

Provide the most recent audited financial statement. If none exists, please provide the most recent 990. If these sources are already online, either your website or Guidestar, please forgo the attachment and provide a link.

*Character Limit: 250 | File Size Limit: 5 MB

Board*

List your board and their professional affiliations.

*Character Limit: 500 | File Size Limit: 5 MB
Strategic Grants--Multi-Year

Marie C. & Joseph C. Wilson Foundation

Basic Information

Project Name*
Name of Project.
Character Limit: 100

Amount Requested*
Explain the requested amount, the breakdown of the multi-year request and why it is important to receive a multi-year award for this work.
Character Limit: 500

Population Served*
Choices
Children and Youth
Families
General Public/Not Specified
Homeless
Immigrants and Migrants
Low Income
Military/Veterans
Offenders/Ex-offenders
People with Disabilities
Substance Use
Unemployed/Underemployed

Program Area*
Choices
Arts and Culture
Community and Economic Development
Education
Health
Housing Development
Human Services
Mental/Behavioral Health
Shelter Support and Services

In what area does your request most closely align?*
If appropriate, you may choose more than one option. There are specific questions related only to your chosen area(s) later in the application. For example, if you select Capacity Building, you will not answer questions about Advocacy.
**Choices**
Capacity Building  
Collaboration  
Prevention  
Advocacy

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**Project Information**

How will your work and this grant contribute to reducing the impacts of trauma and housing instability for youth and families?*  
*Character Limit: 5000*

How will this grant help your organization make the lives of your constituents better?*  
*Character Limit: 2500*

Explain the desired indicators, outputs and outcomes for the grant. Also include how indicators are collected. What research—or if not research-based, what theory of change—supports your belief that the desired outcomes will be achieved? *  
*Character Limit: 5000*

Who is the target population for the overall organization, and if applicable and different, for this request? How will you ensure their buy-in? (if this is for internal funding, please include staff buy-in)*  
*Character Limit: 2500*

What partners are critical to your work?*  
*Character Limit: 2500*

How is your organization contributing to initiatives like RMAPI, ROC the Future, Systems Integration and/or All Kids Thrive? And elaborate, if able, on implementing strategies relating to the RMAPI guiding principles.*  
*Character Limit: 5000*

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**Capacity Building**

Explain the need for capacity building specific to this funding request?*  
*Character Limit: 5000*

How will it be delivered and what is the strategy to embed it into the organization? Include any outside consultants and resources*  
*Character Limit: 5000*
How will capacity building contribute to your organization’s success? And client success?*

*Character Limit: 5000*

How do you grow leaders, both internal to your organization, and external with your constituents?*

*Character Limit: 5000*

**Collaboration**

If this is for a new collaboration, explain the partners, the intended goals and how you will reach those goals.*

*Character Limit: 5000*

If this is to participate in an existing collaboration, explain how the funds will be used and why the collaboration is important to your organization and clients.*

*Character Limit: 5000*

Explain if this request is for another form of participation in a collaborative process.*

*Character Limit: 5000*

**Prevention**

If this grant is for program expansion, has there been a third-party evaluation of the program? If this is for implementing a new program, why have you chosen this program and what feedback did you receive on it from clients? Has the program been previously evaluated in another community or organization?*

*Character Limit: 5000*

What barriers exist that prohibit successful implementation, expansion and/or assessment that this funding can break down?*

*Character Limit: 5000*

If this request includes implementing client-level assessment, explain why these assessments have been chosen and how the results will positively impact services to the client.*

*Character Limit: 5000*

**Advocacy**

If your organization works in advocacy, how is that done and how are your clients included in the process?*

*Character Limit: 5000*
How will this effort increase coordinated care for clients across agencies? If this request also includes technical assistance or data design, explain how it will be implemented and sustained. *

Character Limit: 5000

If this request includes public awareness, explain the details of the campaign, the buy-in and the goals. How will you determine success?*

Character Limit: 5000

Organization Information

How is leadership supporting this request?*

Character Limit: 2500

How is the community you serve represented in your organization?*

Character Limit: 2500

Budget*
Provide last year's actual and current year's budget

File Size Limit: 5 MB

Financials*
Provide the most recent audited financial statement. If none exists, please provide the most recent 990. If these sources are already online, either your website on Guidestar, please forgo the attachment and provide a link.

Character Limit: 250 | File Size Limit: 5 MB

Board*
List your board and their professional affiliations.

Character Limit: 500 | File Size Limit: 5 MB