

# Wood River Women's Foundation Pooled Grant Application 2022

Status: Live on Nov 1

DISABLE

OVERVIEW

REQUIREMENTS

EVALUATION SETTINGS

ACTIVITY

**Start:** Nov 1, 2021 **Deadline:** Dec 1, 2021 **Grace Period:** None

**Application Fee (USD):** \$0.00 ?

**Applications:** None

PRINT

EDIT PROGRAM SETTINGS

**Share:**

## Forms

### *Pooled Grant Cover Page*

- Organization's Legal Name**
- Mailing Address and phone**  
Street, City, State, Zip Code, Phone
- Executive Director Name and Phone Number**
- Executive Director Email**
- Nonprofit Contact**  
Name - If different from Executive Director please include Phone and Email Address
- Mission of Organization**
- Title of Grant Request**  
How would you like us to refer to this Grant request?
- Amount Requested From WRWF \$**  
Grants requests of at least \$ 5,000 and up to \$ 20,000

### *Pooled Grant Request*

- Description**  
Describe as specifically as possible how your grant request will enhance your mission and the delivery of services. Suggested information to provide may include the following questions....What community needs or challenges does this grant seek to address? What activities will you undertake? How will staff be involved? Who are the targeted participants? If this is a joint application, please describe the involvement of each organization. What is your long-range view of this activity? Include a timeline if applicable.  
If funds for a project are needed prior to May 2022, please be aware that your application may not be considered in the 2022 Grant cycle.
- Grant Objectives**  
Provide a summary or overview of your long-range goal, i.e. the change you hope to bring about. Then list 3 to 4 measurable objectives or outcomes. How many participants will you serve over what period of time? What do you hope participants gain from their involvement? Please think in terms of specific, quantifiable objectives.
- Grant Evaluation**  
Grant recipients will be required to submit a year-end report. In light of the grant objectives above, how will your organization assess and evaluate the effectiveness of the proposed grant? What evidence will you have of changes in the lives of participants? What evaluation tools might you use, such as a pre/post instruments? How frequently will you collect data and monitor progress of your outcome objectives?
- Signature - Executive Director**  
We the undersigned, if awarded a grant, agree to use the grant money only for the above mentioned purpose and to report on the use of grant funds and the results at the end of the funding cycle in June 2023.  
  
Typed name shall become the signature

### *Budget Related to this Proposal*

- Describe how this grant would support/affect your operating budget. Include any detail on how the funds you are requesting will specifically support the purpose underlying your application.**
- Often WRWF funding is used to leverage funding from other sources. If this is the case relative to your proposal, please describe how this WRWF grant will help provide such leverage and from whom.**
- If full funding towards your objectives is not obtained, how will you proceed?**

### *Organization's Budget and Income Statements*

- Please upload your organization's current annual budget (revenue & expenses)**  
Attach this information as a .pdf. If this is a collaborative grant request, please include budgets for each partner organization.

### *Application Exhibits*

- Grant Attachments - Optional**  
A maximum of 3 images may be uploaded that may assist in further explaining your request. No videos are permitted, images only.
- Attached proof of non profit status.**  
Upload a copy of your Verification of Tax Exempt Status, IRS 501 (c) 3 Determination Letter
- Attached Board of Directors**  
List your Board of Directors