

**United Way of Colquitt County
Community Impact Grant Application
Focus Area – Education, Health, or Financial Stability
Calendar Years 2022-2025**

United Way has a proud history of raising and distributing funds. However, our new endeavor with community impact is an opportunity to take our work to a new level where the focus is on issues, strategies, and the actions needed to improve lives and create lasting change in our communities. United Way Worldwide is focusing on three areas for community impact – health, education and financial stability. The board of United Way of Colquitt County has decided to offer RFPs in the areas of Education, Health or Financial Stability for this grant award.

Applications for funding must align with at least one of these areas and provide an explicit target outcome – specific improvements sought in the lives of the defined community population.

EDUCATION

Access to education or educational programs for all demographics in our community.

HEALTH

Helping the whole person from birth to senior adults from mental to physical health.

INCOME

Conduct population-specific outreach to lower-income workers to increase enrollment in basic education and job readiness programs.

Remove barriers to participation in basic education and job readiness programs by promoting flexible class hours, use of modularized curricula, and provision of transportation and childcare subsidies and tax-credits.

Provide for “gap” services, including books/materials for education/ training, work tools, dress, cost of temp-to-permanent fee.

United Way of Colquitt County also specifies the following conditions for this funding:

- A. Proposals will be accepted from 501©3 organizations as well as other government or charitable organizations if the proposal is aligned with the organization’s mission.
- B. Individual request will be funded for up to three years assuming organizations meet annual requirements and requests may not exceed \$8,000 per year.
- C. Funded activities must demonstrate need and benefit to the community.
- D. Funding may be used only for Colquitt County programs and residents.
- E. Each applying organization must provide a measurement tool for their program/activity. The measurement will tie in to one of the strategies in the United Way education, health or financial stability framework.
- F. Local support and partnerships should be identified in the application and considered in making funding decisions.
- G. The impact of this project will be felt in the community and by the target population beyond the three-year funding period.
- H. Applicants must have an outline as to how it will include and publicize its partnership with United Way of Colquitt County in the program.

United Way Impact funds **may not** be spent on the following:

- 1. To replace other funds currently being spent on this initiative.
- 2. Capital campaigns, to purchase buildings or other real estate.
- 3. To reduce existing deficits.
- 4. To support the applicant’s out-of-county activities.

Review of Applications:

A grant review committee consisting of 3 United Way board members with one board member as committee chair and up to 3 non-board members from the target area field. Each organization will be required to meet with the committee to discuss their request. Organizations receiving awards will then meet semi-annually with the committee to review proposals and report progress.

Disbursement of Funds to Grantees

Successful applicants will receive 75% of their annual funding in September 2022 and 25% after the completion of the mid-year report. The subsequent annual funding will follow the annual and mid-year reviews.

Applications must be submitted on original forms provided, with all required supporting documents and mailed or delivered to United Way of Colquitt County **by July 22, 2022.**

Applicants must submit an original signed copy plus 8 additional copies.

Questions may be directed to: Caroline Horne Phone: 229-985-2627 or caroline@uwccga.org

UNITED WAY OF COLQUITT COUNTY

Community Impact Grant Application

Years 2022 - 2025 September - August Fiscal Years

APPLICATION COVER SHEET

Organization Information

Date of Application: _____

Agency/Organization: _____

Executive Director/CEO: _____

Project Title: _____

Project Director/Contact Person: _____

Mailing Address:

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **Fax:** _____

Contact Person's Email: _____

Your agency's mission statement:

2. Total agency operating budget last fiscal year \$ _____

Total agency operating budget current fiscal year \$ _____

Eligibility

Applicant is a division of:

Non-Profit State Government
 Local Government Educational Institution
Other _____

Applicant is a 501©3 organization as determined by the IRS for at least one year?

Yes No

Applicant is incorporated in the state of Georgia for at least one year?

Yes No

Total Cost of Program \$ _____

Grant Amount Requested \$ _____

If other funds are needed what is the source of your additional funding?

Certification

This application requires two different signatures by the organization’s leadership in blue ink.

With their signatures each affirms:

“I certify that the information in this application is true and accurate to the best of my knowledge and belief.”

Highest-Ranking Executive Staff or Highest-Ranking Corporate Official

Print Name	Title
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Signature (please sign in blue ink)	Date
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Chief Volunteer Officer or Board Chair

Print Name	Title
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Signature (please sign in blue ink)	Date
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Program Name

Focus Area and Strategy

- A. Program description** – provide the narrative on a separate sheet of paper labeled **A** to include the following.
- Description of the program
 - Area of need the program will address – your goals and objectives.
 - How this program will address this need
 - Number of individuals expected to be served by this program.
 - Are services free or fee based? If fee based, will there be a needs test or sliding fee scale?
 - Who are the key leaders for the program and how will it be supported?
 - Will you partner with other organizations on this program? Who and in what capacity?
 - How does this program address your mission statement?
 - If you plan to utilize volunteers – how do you identify and screen your volunteers?
 - Specific ways you will measure success of the program – This information will be reported in your annual and mid-year reports.**
- B. Outreach/Marketing** – provide information on sheet labeled B.
- How will you reach your target audience?
 - What media forms will you use, how, frequency, etc.?
 - Specific outreach to underserved individuals.
 - Is your program accessible to all parts of the community or does it target a specific neighborhood or population?
 - How do you plan to outline UW as a partner in this program? What are your plans to include or publicize UW and the partnership?
- C. Budget**
- Complete the attached budget for your program.
 - Attach a narrative explaining funding sources for this program labeled C.
- D. Additional Requirements (applicable to your organization)** – label attachments as D.
- Proof of nonprofit or government status
 - List of Board of Directors with addresses
 - Copy of anti-discrimination policy.
 - Copy of audit or annual review (Unless already provided this year)
 - Copy of 990 (Unless already provided this year)
 - Secretary of State registration as charitable organization
 - Current year operating budget for UW non-member agencies & non-governmental agencies.

Program Funding Request Form

*****Attach a detailed explanation of each item over \$500.**

Program Revenue – specific to the program for which you seek funding - September – August <i>Expense & Income categories may be changed to fit your specific needs.</i>	2022 - 2023	2023 - 2024	2024 - 2025	
1. United Way Grant				
2. Government Support				
3. Foundations/Private Grants				
4. Client/Program Service Fees				
5. Contributions				
6. Sales of Materials				
7. Fundraising Events/Other Income				
8. Investment Income				
TOTAL PROGRAM REVENUE				
Program Expenses specific to the program for which you seek funding.	2022 - 2023	2023 - 2024	2024 - 2025	
1. Salaries (program staff)				
2. Contract Labor				
3. Benefits/Taxes				
4. Professional Fees				
5. Supplies				
6. Travel				
7. Communication (phone, fax, printing)				
8. Occupancy (utilities, etc)				
9. Affiliate Payments				
10. Major Property/Equipment Acquisition				
11. Conference/Training				
12. Program Administration				
13. Postage/Shipping/Printing				
14. Other – list separately				
TOTAL PROGRAM EXPENSES				

United Way of Colquitt County
Community Impact Grant – Education
MID-YEAR PROGRAM REPORT FORM

Period Covered: September 2022 - February 2023 Due: March 17, 2023
 Meet with panel in April 1st year-end report – October 2023

Your program funding will run September through August annually.

Organization Name _____

Organization Director: _____

Person Completing Report _____

Phone _____ Email _____

Please answer the following questions as they relate to the Funding Allocation awarded to your agency by United Way of Colquitt County in August 2021. Feel free to attach additional pages if needed.

1. Have there been any changes to the type or level of service/program funded by this grant?
 If yes, please explain.

2. Did your agency experience any staffing changes during the period covered by this report?
 If yes, please explain.

3. **Provide specific information** (numbers served, programming, measurements) about your
 program to date and progress toward achieving your goals.

4. Has your agency experienced any significant changes in your budget or financial status?
 If yes, please explain.

5. Include a report from your measurement tool, with detailed results, developed for this grant.

6. Complete the budget attached with your expenses to date.

Program Funding Request Form ***Attach a detailed explanation of each item over \$500.

Program Revenue – specific to the program for which you seek funding	2022/2023 Budget	2022/2023 Income to date
United Way Grant		
Government Support		
Foundations/Private Grants		
Client/Program Service Fees		
Contributions		
Sales of Materials		
Fundraising Events/Other Income		
Investment Income		
TOTAL PROGRAM REVENUE		
Program Expenses specific to the program for which you seek funding.	2022/2023	2022/2023 Expenses to date
Salaries (program staff)		
Contract Labor		
Benefits/Taxes		
Professional Fees		
Supplies		
Travel		
Communication (phone, fax, printing)		
Occupancy (utilities, etc)		
Affiliate Payments		
Major Property/Equipment Acquisition		
Conference/Training		
Program Administration		
Postage/Shipping/Printing		
Other – list separately		
TOTAL PROGRAM EXPENSE		

