

# F. R. BIGELOW FOUNDATION

*The following questions and list of required materials will appear on the Fall 2022 competitive grant applications for F. R. Bigelow Foundation. Our hope is that sharing specific application questions and requirement materials in advance will give you more time to compose an application that you feel best represents your important work. Our general focus areas remain unchanged, and you will note that we made more application questions optional for this round. This is an acknowledgment that your time and effort are valuable.*

## Capital and Project/Program Grant Application Questions

### Organizational Information

*Required fields are denoted by an asterisk (\*)*

- Application/ Project Name\*
- Organization's Legal Name\*
- Organization Doing Business as Name (if different than legal name)
- Year Established\*
- Org. Employer Identification Number\*
- Organization Address
- Organization Main Phone number
- Organization Website
- What is your organization's mission statement?\*
- Indicate what percentage of your organization's services benefit the East Metro, West Metro, Greater Minnesota and other locations. *(Table format – percentages must add to 100%)\**
- Describe the work of your organization including list of current project/ program areas *(2000 characters max)\**
- Number of organization full-time paid staff\*
- Number of organization part-time paid staff\*
- Number of organization volunteers\*
- List other types of assistance (e.g., Vistas, Interns, AmeriCorps consultants, etc.)
- Organization's current year Budget *(Budget must also be uploaded in Section 5 Required Documents)\**
- What is your organization's current financial situation? What financial changes do you foresee in the future? *(2,000 characters max)\**
- Executive Director Name\*
- Executive Director Title\*
- Executive Director Email\*
- Executive Director Phone\*
- If applying with a fiscal sponsor, please provide the organizational information for the fiscal sponsor\*

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## Racial Demographics Data for Organization

*Required fields are denoted by an asterisk (\*)*

- Who does your organization directly serve? (*Choose one: Individuals and/or families or other organizations*)\*
- If individuals and/or families, do people of color represent a majority of the population served by your organization (through all its projects/programs, initiatives, services, etc.)?\*
- If other organizations, do people of color represent a majority of people served by the organizations/entities?\*
- What is the primary racial/ethnic group served by your organization?\*

  - American Indian/Native Alaskan
  - Asian
  - Black/ African American
  - Latino/Hispanic
  - Native American/ Pacific Islander
  - Two or more races/Other
  - White/Caucasian
  - General Population/ No Specific Racial or Ethnic Group

- How many people total serve on your board of directors or equivalent governing body?\*
- Of these, how many identify as Black, Indigenous or people of color?\*
- How many people serve in your organization's senior level management (including executive director or equivalent position)?\*
- Of these, how many identify as Black, Indigenous or people of color?\*

## Grant Request Details

*Required fields are denoted by an asterisk (\*)*

- Purpose of Grant (*Choose one*) \*

  - General Operating
  - Capital
  - Program/Project

- Proposed Grant Start Date\*
- Proposed Grant End Date\*
- Amount Requested\*
- Applicant Contact Name (If different than Executive Director)
- Applicant Contact Title
- Applicant Contact Email
- Applicant Contact Phone
- If you are serving as the Lead Organization in a collaborative effort, please list partner(s) here (500 characters max)
- Do you have an active grant with the Foundation? (*Choose one: Yes or No*)\*
- If yes, then include an update that addresses the extent to which you have achieved proposed grant objectives for the active grant (1,500 characters max)\*

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- Select one primary interest area from the list that best describes the focus of your grant request (*Annual Membership – For Foundation Staff Use Only*)\*
  - Arts & Culture
  - Community & Economic Development
  - Education & Youth Development
  - Health
  - Housing
  - Human Services

### Grant Narrative Questions

*Required fields are denoted by an asterisk (\*)*

- Describe the opportunity, challenge, issue or need that your organization is currently facing. Share any supporting data/research/documentation that you think might help us to understand what you will be working to achieve with grant support (*2,000 characters max*)\*
- Why is your organization best suited to do the work outlined in the proposed grant? (*2,000 characters max*)\*
- Who will be directly served by the proposed grant? Individuals and/or families or other organizations/entities? (*Choose one*)\*
- If individuals and/or families, do people of color represent a majority of the population served by the proposed grant for which you are currently requesting funding?\*
- What is the primary racial/ethnic group served by the proposed grant?\*
- American Indian/Native Alaskan
- Asian
- Black/ African American
- Latino/Hispanic
- Native American/ Pacific Islander
- Two or more races/Other
- White/Caucasian
- General Population/ No Specific Racial or Ethnic Group
- If organizations, please describe the majority of people served by organizations/entities (*500 characters max*)\*
- Provide any additional information not already captured regarding the primary population to be served by the proposed grant (*1,000 characters max*)
- Identify the age group to be served by the proposed grant (*select all that apply*)\*
  - Children and youth (0 – 17)
  - Young adults (18 – 24)
  - Adults (25 – 64)
  - Older adults (65+)
- What does success look like for your organization by the end of the grant period? (*2,000 characters max*)\*
- How many staff members will lead the program for which you are currently requesting funding?\*
- Of these, how many identify as Black, Indigenous, or people of color?\*

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## Required Documents

*Required fields are denoted by an asterisk (\*)*

- Current Year Operating Budget\*
- Program/Project or Capital Budget\*
- Year End Income and Expense Budget\*
- Year End Balance Sheet\*
- Current Board Member List\*
- Fiscal Sponsorship Agreement\*\*
- Fiscal Sponsorship Operating Budget\*\*
- Fiscal Sponsor Income and Expense Sheet\*\*
- Fiscal Sponsor Balance Sheet\*\*
- Fiscal Sponsor Board Member List\*\*

*Required only if organization is not a 501(c)3 AND has a fiscal sponsor by (\*\*)*