Direct Service Application for CBO

Admin Only

Meeting Date
Character Limit: 10

Site Visit:*  
Choices
Yes
No
Not Necessary

Type of Support:*  
Choices
Project Support
General Operating Support
Capital Support
Challenge Grant/Capital Support
Challenge Grant/General Support
Technical Assistance Support
Recovery Funds Support
TSIF Director/Matching Gift
Other Support

Grant Type*  
Choices
One Time
Installment
Matching Grant
Director/Employee Matching Gift

Amount Recommended*  
Character Limit: 20

Source of Funding:*  
Choices
Other Funds
Philanthropy New York Funds
The Staten Island Foundation Funds

Notes:  
Character Limit: 10000
Organization Information

What is your organization’s mission and vision?*
Guidance: Mission is what you do, and vision is the end state you wish to achieve. The best mission and vision statements are short and clear. Describe how your mission gives you focus and guides your actions and decisions.
Character Limit: 2500

Organization's current programs and services*
Please give a brief overview of your organization's current programs and services with a special emphasis on those programs and services that relate to the grant request.
Character Limit: 2500

Date established*
Character Limit: 10

Number of full time staff*
Character Limit: 25

Number of part time staff*
Character Limit: 25

Annual operating budget*
Character Limit: 20

Total number served annually unduplicated*
Character Limit: 25

What strengths and expertise does your organization have?*
Guidance: The Staten Island Foundation wants to understand what your organization does especially well. This may include four elements:
a) Knowledge – your organization’s unique insight into participant barriers and opportunities
b) Skills – what your organization knows how to do
c) Change agent – how your organization uses its skills and knowledge to influence others to change their behavior or condition
d) Experience – length of time and track record in the proposed focus area
Character Limit: 2500

Past achievements*
As a result of your efforts, what has your organization achieved in the past three years that most relates to the project for which you seek The Staten Island Foundation support?
Guidance: Describe how many people or places have measurably improved their behavior or condition through your efforts and in what ways rather than describing your organization.

*Character Limit: 2500*

**What leadership and financial factors reflect your sustainability as an organization?***

*Guidance:* The Staten Island Foundation seeks to invest in financially viable organizations that are able to focus sufficiently on implementing their projects. Please address each of the following areas:

- **Finances** – Trends, events, and other factors such as donor base and cost control that influence your financial viability, including having enough cash to operate.
- **Leadership** – Current strengths to achieve success. Include recent or anticipated changes of key people at board and staff levels as well as any current gaps in capacity.

*Character Limit: 2500*

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**Request Snapshot**

**Project title***

Provide a title for the project for which you are requesting funding. The title should be no longer than ten words.

**NOTE:** Title should not contain the name of the organization.

*Character Limit: 100*

**Population Served:***

Please select the population (only one) that will be served with this grant:

**Choices**
- Youth
- Seniors
- Homeless
- General and Disadvantaged
- Physically Disabled
- Developmentally/Mentally Disabled
- Psychologically Disabled
- Disaster Victims
- Other

**Geographical Area Served:**

Please select the geographical area that will be served with this grant:

**Choices**
- Greater New York Area
- Staten Island
- Staten Island, Mid-Island
Staten Island, North Shore
Staten Island, South Shore

**Overall project budget**
Please indicate the total, overall budget for this project. This must equal the dollar amount stated in the required project budget attachment.

*Character Limit: 20*

**Amount requested**
Please indicate the amount you are requesting.

*Character Limit: 20*

**Project Budget Form**
Please complete the Project Budget Template and upload it here

*File Size Limit: 2 MB*

**Focus Area and Result Outcome for the project:**
**Guidance:** Here you will first choose your Focus Area and then select the ONE Result Outcome you are seeking to achieve. (If you are uncertain, see The Staten Island Foundation Guidelines).

**Project start date**
Select date with calendar icon.

*Character Limit: 10*

**Project end date**
Select date with calendar icon.

*Character Limit: 10*

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**Your Participants**

**Who are the participants you anticipate working with during the grant period?**
**Guidance:** What are the characteristics of the participants you will reach directly through your project, and are they in any way different from the full set of people or places that are facing this issue within the community you serve?

*Character Limit: 1500*

**How many participants do you plan on working with during the grant period?**

*Character Limit: 25*

**How many participants do you anticipate will achieve the projected result(s)?**

*Character Limit: 25*
How many participants will have difficulty achieving results because of barriers they may face?*
Please estimate how many participants you anticipate will face barriers causing them difficulty in achieving the proposed results. The barriers we are referring to are the types of behaviors and conditions your participants face PRIOR to your working with them.

Character Limit: 25

Project Information and Anticipated Results

Project summary*
Please provide a brief description of the project for which you seek support, including the overall goal of the project, use of The Staten Island Foundation funds, total anticipated number of people or places to be served and geography served by the project.

Character Limit: 1500

What is the issue or opportunity you want to address for your participants?*
Guidance: State the challenge or problem you are trying to address in clear terms as it is experienced by the participants who are affected. Focus on the set of people, organizations or environmental elements in Staten Island to explain the community issues that support the need for the proposed project.

Please provide data that you have collected or from a recognized source within your field, related to the issue you wish to address.

Character Limit: 1500

Please describe what barriers your participants may face preventing them from achieving the results:*
If you feel there are no barriers, enter "None" into the text field below.

Character Limit: 1500

What results do you anticipate achieving with this grant?*
This is the most important question in the application, so please be specific about the results you expect to achieve.

Guidance: Results are the changes in the behaviors or conditions of participants based on your project. Do not focus on activities, projects implemented or levels of participant satisfaction. The fact that participants have completed activities is not alone reflective of changed behavior. Strong results for direct service grants are based on these three factors:

1. A clear and verifiable change in behavior or condition is described for participants after they have completed the program.
2. Results go far enough down the "results trail" to be "rolled up" to the Foundation result they are linked to.
3. Results are set at a high enough level given participant barriers and amount of service/interaction offered.

**Charater Limit: 3000**

**Explain how you will know when your project's results have been achieved?**
What information or evidence will be used to verify success?

**Guidance:** Verification is easier and less costly than evaluation. Keep it as simple as possible and look to methods that are low effort and low cost. You may be able to use existing data sources or rely on existing measuring instruments. You may also be able to use observations and reports by others or in some cases, self-reported behaviors.

**Character Limit: 1500**

**What will you do to support and sustain the positive results achieved by this grant?**

**Guidance:** It is often easier to achieve a result than to sustain it over time. Indicate what additional services, if any, may be available both during and after the grant period to sustain the results achieved from your efforts.

**Character Limit: 1500**

**What are the key elements of your project that are critical to achieve the proposed results?**

**Guidance:** Your project should reflect a coherent strategy to achieve a result. Tell us the key elements of your project that must be in place for you to succeed with those you serve. Be sure to include the essential elements and the general structure that must be in place and how much interaction is required throughout the project to ensure success.

**Character Limit: 2500**

**Describe the steps/milestones you will use and a timeline for when each milestone will be achieved:**
Describe the three to five key participant milestones you will use to manage progress, the critical activities you or others will take to help participants accomplish each milestone, and a timeline of when those milestones will be achieved.

**Guidance:** We do not need a list of every activity you will undertake, but are looking for three to five critical steps. Our intent is to get a sense of your work, the specific milestones for participants, and timing to get to your results. You should clearly define success for those you serve at each stage of your project (milestone). The assumption is that unless people or places reach each milestone, the chance of them achieving the result diminishes.

**Character Limit: 5000**

**What information will you use to track success?**
What information will you use and how will you capture it in order to track success and make course corrections in the project?
Guidance: Describe the methods you will use to collect this information and how it will be used by staff and project management to keep people or places on course to the result.

*Character Limit: 2000*

**Key People and Groups**

**Who will lead this project?**

Guidance: Explain why the project leader is most qualified to achieve the results you seek. If the success of this project is dependent on a person’s training or education, be sure to explain the relevance. This is a critical element in predicting project success. People are more powerful than great plans, a big committee, or even a lot of money in achieving results. While you may first consider resume details - e.g., degrees and years of experience—do recognize that in many areas, there is no strong correlation between these factors and ability to run an effective project. Much research suggests, for example, that on-job learning is far more useful to people than is what they learned in a classroom years ago. And when a person has 20 years of experience that may be good or it may not!

*Character Limit: 2000*

**Who are the key persons who will implement the project?**

What about them suggests they can help the people or places served get to the intended results? The same guidelines apply here as to the project leadership.

*Character Limit: 2000*

**Are any partners or intermediaries critical to your success?**

*Choices*

Yes

No

**If so, what must they do, and what is the evidence that they are committed to do it?**

Guidance: Focus on those groups who have a role in your success and on their commitment to play that role. An intermediary is a group or person whose behavior you do not control, but who must do something for you to succeed—and often just to enter a setting. A partner is a group which has the skills or talents to augment or counterbalance your own as a part of project delivery.

*Character Limit: 2000*

**Documentation**

Please upload the following documents:
Cover Letter signed by organization CEO or Executive Director*
The cover letter should be addressed to the Executive Director and contain a summary of your proposal as well as any recent communications. Include the amount of funding requested, people it will serve and need to be addressed. If this is a first time applying, include a brief introduction of your organization.

*File Size Limit: 2 MB

List of Board of Directors*
*File Size Limit: 2 MB

Current Organizational Budget*
Please upload your current organizational budget here.

*File Size Limit: 2 MB

Audited Financial Statements*
Please upload a copy of your organization's audited financial statements here.

*File Size Limit: 2 MB

Supplemental Financial Information Form*
Please complete the Supplemental Financial Information Form and upload it here.

Guidance: List the total operating income and expenses of your organization for the last three completed fiscal years as shown on IRS Form 990. If the 990 is not yet available for the most recently completed fiscal year, list the un-audited final income and expenditures and indicate the numbers are un-audited.

*File Size Limit: 2 MB

Authorized Signature
By typing in your Name, Title and Date in the fields below, you confirm that you are authorized to submit this application on behalf of your organization.

Name:*  
*Character Limit: 75

Title:*  
*Character Limit: 75

Date:*  
*Character Limit: 10