Capacity Building Application

The Staten Island Foundation

Admin Only

Meeting Date

Character Limit: 10

Site Visit*

Choices
Yes
No
Not Necessary

Type of Support*

Choices
Project Support
Capital Support
General Operating Support
Strategic Planning Support
Technical Assistance Support
Technology Upgrade Support
Emergency Support
TSIF Director/Employee 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
The Staten Island Foundation Funds
Philanthropy New York Funds
Other Funds

Notes:

Character Limit: 10000
I. Organization Information

1. What is your organization’s mission and vision?*
   Character Limit: 2500

2. Organization's current programs and services*
   Please emphasize those programs and services related to the grant request.
   Character Limit: 1000

3. Date established*
   Character Limit: 10

4. Number of full time staff*
   Character Limit: 25

5. Number of part time staff*
   Character Limit: 25

6. Annual organizational budget*
   Character Limit: 20

7. Total number served annually unduplicated*
   Character Limit: 25

8. What strengths and expertise does your organization have?*
   Guidance: What does your organization do well? This may include:
   a) Knowledge – your organization’s unique insight into participant barriers and opportunities
   b) Skills – what your organization knows how to do
   c) Experience – length of time and track record in the proposed focus area
   Character Limit: 2500

9. Past achievements*
   What has your organization achieved in the past three years that most relates this request?
   Character Limit: 2500

10. Given the economic downturn, tell us your plan for financial viability going forward.*
   Guidance: The Staten Island Foundation Board of Directors seeks to invest in financially viable organizations that are able to focus sufficiently on implementing their projects.
   Character Limit: 2500
II. Request Snapshot

1. 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

2. 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

3. Diversity, Equity & Inclusion*

a.) For each category give us, or estimate, your percentage of people of color who are Board Members, Staff Members and Clients:

*Character Limit: 250

b.) Tell us your organization’s thinking about racial equity and how it informs development and implementation of programs:*

*Character Limit: 2000

c.) Are clients and other constituents involved in the work and/or decision-making of your organization?

*Character Limit: 1500

4. 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

5. Amount requested*

*Character Limit: 20
6. Project Budget Form*
Please complete the Project Budget Template and upload it here

*File Size Limit: 2 MB

7. Focus Area and Result Outcome for project*

*Guidance:* 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).

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

*Character Limit: 10*

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

*Character Limit: 10*

III. Project Information

1. 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*

2. Challenge or opportunity*
Describe the challenge or opportunity you face which, if addressed, would have a clear impact on project delivery and results for those you serve.

*Guidance:* Here are some areas in which challenges or opportunities arise:
- Staffing- increased or undesired staff turnover, resignation of a key leader, staff who are ready to take on additional challenges, board leadership changes, etc.
- Organizational Structure- outgrowing the current policies, space, resources, processes or technology, a new growth opportunity that matches the strengths of the organization
- Resource Allocations- new requirements from funding sources or policy makers that create the need to focus differently, inefficient methods to track and measure success for those served, etc.

*Character Limit: 2500*
3. Describe the steps/milestones and a timeline for when each milestone will be achieved:*
   **Guidance:** Provide a brief description of the three to five most critical steps in your capacity building efforts, what needs to be achieved at each step to be successful, and a timeline for when each step will be completed.
   
   *Character Limit: 5000*

4. What changes in organizational policies, practices or staff competencies must be in place?*
   **Guidance:** List the organizational changes (e.g., policies, practices, roles or new skills acquired) and any other specific changes that will be needed if for the capacity to have the greatest impact.
   
   *Character Limit: 3000*

5. How do you plan to put core competencies in place in order to achieve the results?*
   **Guidance:** Tell us your method to build staff competency where needed to achieve the results you seek with this new capacity. Will you use outside assistance or bring in new staff members? If so, define the role they will play, the characteristics they will need to be successful, and how you will insure that the competency required will be left behind. If core competencies are already in place, enter N/A in text field below.
   
   *Character Limit: 3000*

6. Who will lead this project?*
   **Guidance:** Explain why the person leading this project or effort is most qualified to achieve the desired results.
   
   *Character Limit: 2000*

7. How will you cover a net increase in operating costs from this new capacity?*
   **Guidance:** If the new capacity will lead to a net increase in operating costs, (e.g., maintaining a new computer system, adding staff, increasing the number of program participants), how will you cover these costs in the future? If there will be no increase, enter N/A into text field below.
   
   *Character Limit: 2500*

---

**IV. Anticipated Results**

1. What is the new capacity you want to create to respond to the challenge or opportunity:*  
   Be specific about what new capacity will be in place.
Guidance: Here are some examples of typical capacity building projects:
Staff development- hiring and training
Changes to organizational structure
Technology upgrades and training to increase performance and productivity
Strategic fund-raising and business planning

Character Limit: 3000

2. Please choose one area in which you will achieve results with the new capacity in place:

Choices
To increase number of people served
Increases in results for those served
Increases in revenue
Decreased time to achieve results for those served
Reduction in costs

3. What results do you anticipate achieving with this grant?

This response is most critical to your application, so please be specific about the results you expect to achieve.

Based upon the result area you chose in the previous question, please explain the specific results you anticipate to achieve with the new capacity in place and when you anticipate achieving them.

Character Limit: 3000

V. Documentation

Please upload the following documents:

1. Cover Letter signed by organization CEO or Executive Director
The cover letter should be addressed to the Foundation's Executive Director and should contain anything that is not addressed in the application.
   File Size Limit: 1 MB

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

3. Current Organizational Budget
   File Size Limit: 2 MB

4. Audited Financial Statements
   File Size Limit: 2 MB
5. Supplemental Financial Information Form*
Please complete the Supplemental Financial Information Form and upload it here.

File Size Limit: 2 MB

6. 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