Direct Service Application for CBO

The Staten Island Foundation

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
Emergency 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
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: 2500

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 operating 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 to 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*
For each category give us, or estimate, your percentage of people of color who are Board Members, Staff Members and Clients:

*Character Limit: 250

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

*Character Limit: 2000

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 the 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. Your Participants**

1. **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,?*

*Character Limit: 1500*

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

*Character Limit: 25*

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

*Character Limit: 25*

4. **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.

*Character Limit: 25*
IV. 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. 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.

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

3. Please describe what barriers 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

4. What are the key elements of your project that are critical to achieve the proposed results?*
Guidance: Tell us the key elements of your project that must be in place for you to succeed with those you serve.

Character Limit: 2500

5. Describe the steps/milestones and a timeline for when each milestone will be achieved:*
Guidance: 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.

Character Limit: 5000

6. What information will you use to track success?*
Guidance: What methods will you use to collect information to track success and make course corrections? How will it be used by staff to keep on course to the result?

Character Limit: 2000
V. Anticipated Results

1. 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.
   Based upon the result outcome and focus area you chose, please explain the specific results you anticipate and when you anticipate achieving them.
   *Character Limit: 3000*

2. Explain how you will know when your project's results have been achieved?* 
   What information or evidence will be used to verify success?
   *Guidance: 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.*
   *Character Limit: 1500*

3. What will you do to support and sustain the positive results achieved by this grant?* 
   *Character Limit: 1500*

VI. Key People and Groups

1. Who will lead this project?* 
   *Guidance: Explain why the project leader is most qualified to achieve the results you seek.*
   *Character Limit: 2000*

2. 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?
   *Character Limit: 2000*

3. Are any partners or intermediaries critical to your success?* 
   *Choices*  
   Yes  
   No  

4. 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.*
   *If you answered No to question 3, enter N/A* 
   *Character Limit: 2000*
VII. 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: 2 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