

Focused Opportunity

The Staten Island Foundation

Admin Only

Meeting Date

Character Limit: 10

Site Visit:*

Choices

Yes

No

Not Necessary

Which Foundation Focus Area and Result Outcome does your project align with?*

Guidance: From the dropdown menus, select 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).

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

Is your organization a 501c3 organization as designated by the IRS?*

Choices

Yes

No

Who is the current CEO or Head of the organization?*

Character Limit: 100

Title of the CEO or Head of the organization*

Character Limit: 100

Email address of the CEO or Head of the organization*

Character Limit: 100

Phone number of the CEO or Head of the organization*

Character Limit: 25

What is the purpose of your organization and its primary programs and services?*

Character Limit: 3500

Date established*

Character Limit: 10

Number of staff and/or volunteers*

Character Limit: 25

Annual organizational budget*

Character Limit: 20

Other social media presence besides your organization's website

Example: Facebook, Instagram, blog, etc)

Character Limit: 250

II. Project Description

How will funding for this project be used?*

(In 20 words or less.)

Character Limit: 250

Amount requested*

Character Limit: 20

Project Description and Activities*

Please include details, such as what problem or issue you are seeking to address, who are the people you will work with, what services you will provide, what activities will take place and where they will take place, when the work will begin and end, and anything else you would like to share with us.

Character Limit: 4000

As a result of your project activities, what will be different for your participants?*

Character Limit: 3500

III. Documentation

Please upload the following documents:

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

List of Board of Directors or the organization's leaders*

File Size Limit: 3 MB

Current Organizational Budget*

File Size Limit: 2 MB

Project Budget Form*

Please complete the Project Budget Template and upload it here

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