

Basic Needs Fund 2025 Applicant Guide



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### Introduction

**Great Rivers United Way** is investing up to \$350,000 in programs and projects that support Basic Needs of food, shelter, and safety.

The mission of **Great Rivers United Way** is to unite people and resources to improve lives and strengthen our communities.

The vision of **Great Rivers United Way** is that all individuals and families in our communities will achieve their full potential through education, income stability, and healthy lives.

The Community Investment Fund at **Great Rivers United Way** is funded by generous gifts given by individuals and businesses throughout the community.

The Community Investment Program at **Great Rivers United Way** is investing those gifts in local resources that foster mental wellbeing. Meeting people's needs for food, shelter, and safety is a critical foundation for mental wellbeing.

**Great Rivers United Way** involves community volunteers throughout the granting process as grant reviewers and dedicated committee members who make award recommendations to our Board of Directors. All volunteers receive training on grant evaluation, unconscious bias, and Great Rivers United Way (GRUW) priorities.

## **Important Dates**

#### **Application**

August 19, 2024 - Application Available on CommunityForce

August 21, 2024 - Information Session

October 4, 2024 - Application Due

October 14-November 7, 2024 – Volunteer Grant Review

December 2, 2024 – Target Date for Applicant Notification of Awards

#### **Awarded Programs and Projects**

January 1, 2025 - Grant Start Date

July 31, 2025 – Mid-Year Report Due

December 31, 2025 - Grant End Date

January 31, 2026 – End of Year Report Due

## **Grantmaking Values**

Great Rivers United Way aspires to be inclusive, transparent, and impactful in our grantmaking.

We encourage applications from organizations that have not been grantees in the past as well as organizations with whom we have long-standing relationships. We will be looking at community investments holistically and through an equity lens. This means as we consider our investments, we will look at which populations are being served, the impact of programming for those served, how organizations engage partners and the community, and the geographic service area.

The grant review process will include an opportunity for volunteers to ask clarifying questions about your program or project. Application review will take place October 14 – November 7, 2024 and may include follow up questions or a request for a meeting or visit with the applicant.

## **Funding Priorities**

Great Rivers United Way's Basic Needs Grants mobilize funds to programs and projects that reach people in need of food, shelter, and safety. These critical services are the foundation upon which people can build stability for themselves and their families.

Priority will be given to the following types of programs and projects:

- Collaborative projects –organization's, programs, or projects that effectively partner with others in the community.
- Proven practices programs and projects with a demonstrated history of success.
- Promising innovations programs and projects that approach problems in a new way.
- Equity BIPOC-led organizations or programs and projects intended to serve BIPOC folks.
- Regional reach programs and projects that are located in or effectively reach rural communities.

#### **Grant Awards**

Awards will be between \$5,000 and \$50,000 for a single organization; collaborative projects are eligible to receive up to \$50,000 per partner. Awards will be for one year.

## **Eligible Entities**

Applicants will be screened for basic eligibility criteria prior to gaining access to the grant application. The criteria are as follows:

- Currently maintain tax-exempt organization status under Section 501(c)(3) of the U.S.
   Internal Revenue Code
- Registered as a charitable organization with the state in which they do business unless exempt from such requirement
- Provide human services within the Great Rivers United Way service area: Buffalo,
   Crawford, Houston, Jackson, La Crosse, Monroe, Trempealeau, and Vernon counties
- Can demonstrate board oversight and financial responsibility through board minutes, independent audit or financial review, and IRS Form 990
- Provides services aligned with meeting basic needs of food, shelter, and safety

OR

Has a fiscal sponsor that meets all the above requirements

## **Use of Grant Funds**

Basic Needs Grant Funds should be used to support programs or projects aimed at meeting people's needs for food, shelter, and safety. Funds may be used as needed to support these activities. Grants for proven programming, seed money to start a new program, or projects with a specific start and end will be considered for awards. Grantees will be expected to provide data regarding how funds were spent, numbers of people served, and impact of the programming or project.

## **Proposals**

The deadline for submission is October 4, 2024 at 12pm (noon) Central Time. Late applications will not be accepted.

Applications will only be accepted on the <a href="CommunityForce">CommunityForce</a> grant management platform at https://gruw.communityforce.com/

The grant application contains four sections: Organization Information, Program Narrative, Organization Financials & Program/Project Budget; Oversight & Grant Management. Each section should be filled out completely. Provide concise yet descriptive narrative so that reviewers get a good idea of the problem being addressed by your program, what your program does, who your program serves, and why your program is needed in the community. Reviewers are volunteers from the community and may not be familiar with your agency or programs. All application questions are provided in Appendix 3.

For technical assistance in filling out the application, visit this <u>CommunityForce help page</u>. (See Appendix 2)

#### **Narrative Tips:**

Use the formatting tools available in CommunityForce. Paragraphs and bullet points make your narrative easier to read.

Avoid jargon and acronyms! Community volunteers may not know the specific terms used in your field of work.

#### **Application Understanding and Authorization**

Applications must be digitally signed by the Organization Executive Director/CEO and Board Chair and/or the Fiscal Sponsor Executive Director/CEO.

The statement reads as below:

By signing below, I agree this application for the program listed above fulfills the requirements for Great Rivers United Way funding:

- The applicant organization maintains its 501(c)3 status
- The applicant organization registers as a non-profit annually with the state unless exempt
- The program or project requesting grant funds provides human services
- The program or project supports the basic needs of food, shelter, and/or safety

I affirm that I understand the following conditions:

- The required application materials must be submitted through the online application system (CommunityForce)
- This information will be used to determine program/project eligibility and award amounts
- Application information may be used in Great Rivers United Way marketing.

## **Proposal Review**

Proposals will be first screened by Great Rivers United Way Staff and volunteers of the Fund Distribution Steering Committee to ensure eligibility requirements of the organization and program are met. Ineligible applications and incomplete applications will not be considered for a grant award and will not be reviewed by Community Investment Volunteers.

Proposals that meet eligibility requirements will be reviewed by volunteers organized into teams called panels. Each panel will be comprised of at least one member of the Great Rivers United Way's Fund Distribution Steering Committee, an expert in community needs and services, and

Community Investment Volunteers who are members of the general public. All volunteers receive training from Great Rivers United Way on community needs, unconscious bias, and grant evaluation. Proposals are scored online using a standard evaluation form. The scoring rubric questions are provided in Appendix 4. Proposals will be scored based on the merits of the program, healthy organization financials, appropriate board oversight, grant management, and funding priorities.

#### **Funding Rating**

Reviewers are also asked to make a recommendation of whether or not to fund the program ranging from "Yes! Fully fund this program!" to "No, do not fund this program." The Funding Rating will be used by Great Rivers United Way's Fund Distribution Steering Committee as a gauge for making funding recommendations.

#### **Awarding Process**

The Great Rivers United Way Fund Distribution Steering Committee will review all panel scores, funding ratings, and funding priorities in making an award recommendation. The recommendation is presented to the Great Rivers United Way's Board of Directors for final approval.

## **Post Acceptance Expectations**

All grant awardees will be expected to follow the Great Rivers United Way Grantee Agreement. The agreement includes requirements for data and financial reporting, annual meeting attendance, and partnership in community initiatives. Great Rivers United Way requires sixmonth and end-of-year reports on program progress and budget updates. Site visits may be requested for which advance notice will be given. Great Rivers United Way participates in the United Way Worldwide Impact Survey which combines data and stories to show our collective impact. Awardees are required to participate in data reporting as it relates to measures applicable to awarded programs.

Great Rivers United Way will provide opportunities for networking and education throughout the year. These opportunities are intended to be beneficial to our nonprofit community not a requirement for receiving funding. Ideas from grantees for education or networking are welcome.

## **Great Rivers United Way Contact**

For questions regarding the Community Investment Grant application and funding process please contact Liz Evans at 608-796-1400 ext. 105 or <a href="mailto:levans@gruw.org">levans@gruw.org</a>.

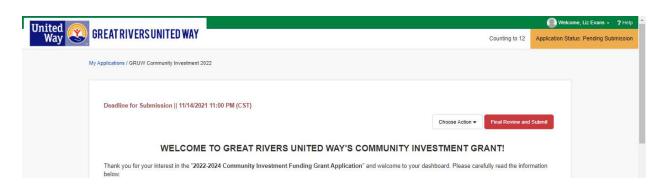


# Appendix 1: Accessing CommunityForce Technical Assistance

For help setting up a user account and basic application technical assistance, view this video:

<u>Grants – Introduction to Grants Training for Applicants</u>

Once an account is created and a user is logged in, the Help guide can be accessed by the Help button in the upper right corner of the screen.



The Help button takes users to the home page for the CommunityForce Zen Desk. Click on "Applicant Open Help For Applicants Use"

# **Appendix 2: Application Questions**

#### **Section 1: General Information**

Organization Information
*Organization Name:
*Organization Executive Director/CEO Name:
*Organization Executive Director/CEO email:
•Grant Contact Name:
• Grant Contact Email:
Does your organization have a fiscal sponsor for this request?  O No, this organization meets the eligibility requirements without a fiscal sponsor O Yes
Fiscal Sponsor Organization Name:
Fiscal Sponsor Executive Director/CEO Name:
Fiscal Sponsor Executive Director/CEO Email:
*Is the person filling out this application the Executive Director or CEO of the organization?  O Yes O No
The applicant organization maintains its 501(c)3 status The applicant organization registers as a non-profit annually with the state unless exempt The program or project requesting grant funds provides human services The program or project supports the basic needs of food, shelter, and/or safety
I affirm that I understand the following conditions:  The required application materials must be submitted through the online application system (CommunityForce)  This information will be used to determine program/project funding amounts  Application information may be used in Great Rivers United Way marketing.
Electronic Signature
Executive Director or CEO Signature:
Effer your name as "Liz Evans" to Confirm your Electronic Signature.
*Organization Mission Statement:
*Organization Summary: Please provide a brief summary of your organization, including how long you have been in operation, your target population and a broad scope of services provided (50 words max).

1	Program Information
	Program Name:
(	•Which basic need(s) does this program or project address? Check all that apply □Food □Shelter □Safety
0	Provide a one to two sentence description of the program (25 words or less).
	Requested amount of program/project support for 2025:  vards will be between \$5,000 and \$50,000

#### **Section 2: Program Narrative**

Program Narrative						
*Program Name:						
*le this application f	ior a new program	an ongoing program, or a	project with a specific sta	rt and end?		
O New Program O On			project man a specimo sta	t dila cila.		
Other	going Frogram OTK	,,,,,				
Please explain:						
- Reade explain.						
*!! t #:						
*How long has this						
Not yet in operation     5 or more years	Cless than 1 year	) 1-0 years				
*Which location or I	ocations does this	program or project serve?	Check all that apply			
☐ Buffalo County	Crawford County	☐ Houston County				
☐ Jackson County	☐ La Crosse County	☐ Monroe County				
☐ Trempealeau County	☐ Vernon County					
*For each county ch	ecked, approxima	tely how many people (or o	ther unit if program/proje	ct does not directly ser	ve people) will be served	in 2025?
						,
*Program Demog	raphics					
		of your ability, fill out the section and saved, upload the document				
	_	phic table with unduplicated in wn space. Use the space prov		-		t collected for certain
		number of unduplicated indiv ed to note any clarifications th			the boxes next to the demo	ographic categories
services to food pant	tries or the may do w	do not provide services direct rork to coordinate organization of directly dealing with individu	ns in a coalition to improve s	ystems. If your program o	does not provide direct service	ces to individuals, or
						D.

Basic Needs Application Data Table.docx

Basic Needs Application Data Table (to be downloaded and filled out and attached)

## Great Rivers United Way Basic Need Application Data Table

Please fill out the section of this document that best fits your program or project: **Ongoing Program, New Program or Project, or Unique Situations.** 

**Ongoing Programs:** Fill out the cell to the right of each category with unduplicated individuals served from January 1, 2023 through December 31, 2023. If data is not collected for certain demographic categories, fill in the unknown option.

Unduplicated Number Served		
Race	Age	
White/Caucasian	Under 18	
Black/African American	18-64	
Asian	65+	
American Indian/Alaskan Native		
Native Hawaiian/Pacific Islander	Sex/Gender	
More than One Race	Female	
Unknown Race	Male	
	Other Gender Identity	
Ethnicity	Unknown Sex/Gender Identity	
Hispanic		
Hmong		
Type any notes in the space below		

Please fill out unduplicated numbers of people served for the following identities from January 1, 2023 through December 31, 2023. If information for any category is not collected, input N/A. If information is collected for a household and not individuals, indicate that in the cell.

Other Identities	
LGBTQ+	
Veteran	
Has Disability	
Homeless	
Unsheltered Homeless	
Low Income	

**New Programs or Projects:** How many unduplicated individuals does the program or project anticipate serving in one year. Check the boxes for demographic categories you plan to collect.

Undu	plicated Individuals Projected to Serve:		
	Data Categories Progran	n or Pı	oject will Collect
	Sex/Gender Identity		Race
	Ethnicity		Age
	Income/Poverty		Disability Status
	LGBTQ+ Status		Housing Status
	Veteran Status		
Note	s:		
Type	notes here		

**Unique Situations:** Some organizations do not provide services directly to individual people. For example, they may serve other organizations such as a food bank providing services to food pantries or they may do work to coordinate organizations in a coalition to improve systems. If your program or project does not provide direct services to individuals, please use this space to list data collected so reviewers get a sense of a year's worth of work.

The state of the s	organization work toward equitable outcomes in the community? Include discussion on how the program and its practices are culturally is; how it advances diversity, equity, inclusion, and belonging; and how it works against structures of oppression. (750 words max)
	aborations: Discuss key partnerships and collaborations with other programs and/or organizations. How do partnerships and collaborations ecific about partnership roles and how partnerships strengthen the program. Provide at least one example. (750 worde max)
	: Describe how a typical participant or client experiences the program. If this is a new program, describe how you envision a participant if this is a new project, describe how someone would experience the project.
Notes: Is there anything	else you'd like to share about your program or project that wasn't asked above?

## Section 3: Organization Financials & Program or Project Budget

rganization Financials &	Program or Project	t Budget			
Requested amount of progra ards will be between \$5,000 an		1025:			
					:
What fiscal year does this pro	ogram operate on? (Sta	art Month-End Month)			
Organization Budget: Upload epted files are Word, Excel, or		ent budget			
					Browse
Current Fiscal Year Budgeted	Expenses: Input the to	tal expense amount on th	e attached current budget. Ro	und to the nearest dol	lar.
					,
Program/Project Budget: Uple epted files are Word, Excel, or		proposed program or proj	ect.		
					Browse
	w grant funds will be use	ed to support the project.	Include justification for how ex	penditures support yo	ur basic needs programming or
ect. rogram/Project Expense Tot				penditures support yo	ur basic needs programming or
Budget Narrative: Describe ho ect. rogram/Project Expense Tot nd to the nearest dollar.				penditures support yo	ur basic needs programming or
rogram/Project Expense Tot and to the nearest dollar.  ding Sources ist your planned sources of re- 12 months for this program. If	al: Input the annual cos	it of the program or proje	ot.	d, future request, futu	re event/campaign, other) over
rogram/Project Expense Tot nd to the nearest dollar.  ding Sources ist your planned sources of re-	al: Input the annual cos	it of the program or proje	ot.	d, future request, futu	re event/campaign, other) over i er button after inputting each fur
rogram/Project Expense Tot and to the nearest dollar.  ding Sources  ist your planned sources of review 12 months for this program. If one.	al: Input the annual cos	it of the program or proje int of support, and status intervide a short explanation quested/Anticipated	of funds (requested, confirme in the status box. Click on the	d, future request, futu SAVE or Add Anothe	re event/campaign, other) over i er button after inputting each fur
rogram/Project Expense Tot and to the nearest dollar.  ding Sources  ist your planned sources of review 12 months for this program. If one.	al: Input the annual cos	it of the program or proje int of support, and status intervide a short explanation quested/Anticipated	of funds (requested, confirme in the status box. Click on the	d, future request, futu SAVE or Add Anothe	re event/campaign, other) over i er button after inputting each fur
rogram/Project Expense Total to the nearest dollar.  ding Sources ist your planned sources of reflection on the program. If one.  Funding Source	al: Input the annual cos	it of the program or proje int of support, and status int of support explanation quested/Anticipated \$	of funds (requested, confirme in the status box. Click on the	d, future request, futu SAVE or Add Anothe Dele	re event/campaign, other) over i er button after inputting each fur te
rogram/Project Expense Total to the nearest dollar.  ding Sources ist your planned sources of reflection on the program. If one.  Funding Source	venue, anticipated amou other status, please pro	it of the program or proje int of support, and status int of support explanation quested/Anticipated \$	of funds (requested, confirme in the status box. Click on the	d, future request, futu SAVE or Add Anothe Dele	re event/campaign, other) over t er button after inputting each fur te
rogram/Project Expense Tot d to the nearest dollar.  ding Sources ist your planned sources of re: 12 months for this program. If ce.  Funding Source  SAVE or Add Another	venue, anticipated amou other status, please pro	it of the program or proje int of support, and status int of support explanation quested/Anticipated \$	of funds (requested, confirme in the status box. Click on the	d, future request, futu SAVE or Add Anothe Dele	re event/campaign, other) over t er button after inputting each fun

Gift Impact
How do these gift/donation amounts impact the program? These are used in GRUW marketing to show donors what a weekly gift of \$1, \$2, \$5, or \$10 can mean for supported programs.  Tip: Please provide four unique statements. Do not simply multiply one statement by 2, 5, 10.
\$52 provides/covers the cost of:
\$104 provides/covers the cost of
\$260 provides/covers the cost of
\$520 provides/covers the cost of:
Notes: Is there anything else you'd like to share about the organization's or the program/project's financials and budget?

#### **Section 4: Oversight & Grant Management**

Oversight & Grant Management	
*Oversight: Describe how your volunteer Board of Directors and/or other volunteer committees provide oversi ems covered at every Board Meeting (i.e. approval of minutes), items periodically reviewed and discussed at me	
*Board Minutes: Please upload your organization's last two sets of board minutes.	
	Browse
*Comparative Financial Statement: Please upload your most recent end of year financial report comparing b	oudget to actual income and expenses.
	Browse
*IRS Form 990: Please upload your organization's most recently filed IRS Form 990.	
The Form 300. Please upload your organization's most recently filed in 3 Porm 880.	Browse
More than 5  *Types of Grantors: What type(s) of grants has your organization received? Check all that apply  United Way   State   Federal  Foundation   Corporate   Not Applicable  Other	
Please explain:	
*Annual Grant Award Total: On average, how much does your organization receive in grant dollars every yea  \$0.\$10,000	policies and procedures are not formalized, please describ
Notes: Is there anything else you think is important to share with reviewers about your organization's oversight	and grant management?

# **Appendix 3: Volunteer Reviewer Scoring Rubric**

Category	Program Narrative	Points
General	Proposal addresses at least one basic need: food, shelter, or safety	Rate 1-5
Need	Need clearly defined and supported by data	Rate 1-10
Impact	Proposed program or project will achieve outcomes to help people in need of food, shelter, and/or safety and/or Proposed program or project will prevent people needing food, shelter, or safety services in the future	Rate 1-10
Equity	Organization develops and implements equity goals and strategies.  Program or project is culturally responsive	Rate 1-10
Partnerships & Collaboration	Partnerships and Collaborations  Organization works with partners to solve problems involving hunger, homelessness, and safety in the community.  Organization works with partners to provide wrap-around care and service to people in need of help.	Rate 1-10
Total	Program Narrative Total Points	45

Category	Financials & Budget	Points
Complete	Requested financial information is provided and complete	Rate 1-5
Program Budget	Requested amount is reasonable in the context of the program or project	Rate 1-5
Organization Budget	The organization budgets well from year to year	10
Deficit Plan	The organization has a concrete plan to deal with any budget deficits.	Rate 1-10
Total	Financials & Budget Total Points	30

Category	Oversight & Grant Management	Points
Active Board	Does the organization meet at least quarterly?	Yes=5 No=0
Board Oversight	Does the board of directors have appropriate fiscal oversight?	Rate 1-10
Grant Management	Rate the organization's ability to manage a grant award?	Rate 1-10
Total	Oversight & Grant Management Total Points	25

Review Process			
Eligibility Screen	Yes/No		
Proposal Review			
Program Narrative	45		
Financials & Budget	30		
Oversight & Grant Management	25		
Sub-total Sub-total	100		
Bonus			
Meets one or more funding priority areas	Yes/No		
Addresses equity and/or disparate outcomes	Yes/No		
Funding Recommendation			
Community Investment Volunteer Funding Recommendation	0-5		