



Grant Application Round 1

Legal name of organization _____

Address _____

Website _____ Phone _____

Telephone number _____ Email _____

Executive Director _____ Email _____

Grant Proposal Contact (if not Executive Director) _____

Grant Proposal Email _____

Tax ID Number: _____ Effective date of IRS 501(c)(3) status _____

Annual operating revenue each of the last three years: _____, _____,
and _____.

Proposal's Area of Focus (circle/indicate all that apply):

Education Health Economic independence Social well-being Human rights

How many members are on your Board of Directors? _____

What percent of your Board of Directors contributes financial support? _____

Please keep in mind the following restrictions:

- The grant seeker may not be a religious institution or a private educational institution; however, outreach programs affiliated with such organizations may be considered.
- Proposals exclusively to fund salaries, marketing, or ongoing operating expenses will not be considered, however, your request may include a limited amount of the total budget to cover these expenses.
- Ribbons of Hope – Invest in Women does not fund endowments or contribute to ongoing or new comprehensive capital campaigns.

1. Please provide your organization's mission statement.

2. Please provide a summary of the proposed program or project for the \$100,000 Award Grant and describe the specific needs it addresses and how it will improve the lives of women and/or children. Address whether it is a new or expanded program or project.

3. Indicate how many of each of the following you are currently serving on an annual basis: Women, Children, and Men.

4. Will the proposed program/project increase the number of individuals served? If so, how will the numbers of Women, Children, and Men increase?

5. Describe how the program or project enhances your organization's mission.

6. Please list your anticipated outcomes. Include measurable, time-sensitive goals. Also, include the method of evaluating the success of your proposed program/project.

7. Please state in detail your budget for the Grant program or project. Budget for proposed Project must equal \$100,000.00. For example:

a. Playground equipment	\$xxx.xx
b. Paving	\$xxx.xx
c. Landscaping	<u>\$xxx.xx</u>

8. Will the project be fully funded by our \$100,000?

9. What percent of your organization's total operating budget is your proposed program/project?

You should submit the above via Dropbox. Instructions can be found on our website at www.ribbonsofhope.net.

*****Each submission via Dropbox *must* have your organization's name on it.*****

Thank you for the amazing work you do for women and children!