

ASSOCIATION OF BALTIMORE AREA GRANTMAKERS COMMON GRANT APPLICATION FORMAT REVISED FOR THE BALTIMORE DIRECT SERVICES GRANTS PROGRAM

Funded by: The Annie E. Casey Foundation Administered by: Associated Black Charities, Inc.

INSTRUCTIONS: All applications for funding should be submitted in 12-point font, single-spaced with 1-inch margins. The application should consist of a proposal cover page, cover letter, proposal narrative, and attachments. Organizations are to submit original plus four (4) complete copies of the entire application, including attachments.

Proposals are due to Associated Black Charities, Attn: Baltimore Direct Services Grants Team, 1114 Cathedral Street, Baltimore, MD 21201 no later than Monday, May 19, 2008, 5:00 p.m. LATE PROPOSALS WILL NOT BE ACCEPTED. The grant period will begin October 1, 2008 for this year's process.

I. PROPOSAL COVER PAGES

You may use the hard copy attached at the end of this document or visit either www.abc-md.org or www.aecf.org to download and print the document.

II. COVER LETTER

Include a cover letter on letterhead that contains the following information:

1. Briefly explain the purpose of the request and the dollar amount requested.
2. Explain how your organization's proposal fits with the Annie E. Casey Foundation's mission and grantmaking interests.
3. The letter must be signed by the board president or chairperson and the executive director to demonstrate approval of the request. For convenience, you may submit two letters signed separately.

III. PROPOSAL NARRATIVE (maximum of 6 pages)

The following outline is a guide to the key information to be provided within the proposal narrative. Use the guide as appropriate for your organization's request.

A. Organizational Background

1. Provide one to two paragraphs that succinctly describe the organization's history, mission, and goals.

B. Purpose of Request and Anticipated Results

1. State the issue or need to be addressed, describe the size and/or severity of the issue or need, and explain the evidence regarding this issue or need. Provide demographic and geographic information regarding the community or population benefiting from or served by the request. Be sure to focus on the assets present in the community. Discuss how the population and/or community to be served is involved in the planning, development and implementation of the proposed program or service, and in the development of this proposal.
2. Describe the program or project for which the organization is seeking funding. State how the proposed program or service will directly benefit disadvantaged children and families. For new programs, describe how the program model was developed. For ongoing programs, describe the program's track record.
3. Discuss the anticipated results (outputs and outcomes) for the request. Explain how the activities directly and/or indirectly address the issue or need and support achievement of these results.
 - For general support requests, describe how the request will enhance organizational capacity, sustainability, and/or the achievement of measurable results for the organization, while providing direct service to the community.
4. Indicate what process and/or impact information will be collected to measure and demonstrate success.
 - Discuss the long-term sources/strategies for funding this program or service after the Baltimore Direct Services Grant expires.

C. Organizational Capacity

1. Describe the organization's ability to implement the request or explain the organizational limitations that funding will address. Include the size and characteristics of the organization's facilities (equipment, building, grounds) and resources (annual budget, sources of support, e.g., donations and matching funds). Include information on the following, as applicable to the request:
 - a. Explain how this proposal relates to the organization's mission, goals and/or strategic plan, and other activities planned for this year.
 - b. Describe how the request will enable the organization to build its capacity, address current limitations, or improve its ability to meet program or organizational goals.
 - c. Describe the organization's current programs and activities, track record, related program or organizational accomplishments, accreditation, awards, or other strengths that enhance capacity or sustainability.
 - d. Describe the organizational structure and board/staff responsibilities and level of volunteer involvement. Indicate which board members are residents of the community or consumers of the organization's programs or services. List the names, qualifications, and number of years in their position for key staff and/or volunteers relevant to the current request.
 - e. Indicate links with other organizations doing similar work in your geographic area or on the same issue.
 - f. Describe the organization's relationship with stakeholders, such as community residents, clients, staff, board members, or other constituents it intends to serve through the Baltimore Direct Services Grants Program. Indicate how local leadership is being developed and how empowerment of the community/group is being achieved.
 - g. Indicate organization affiliation with federated funds or public agencies.

III. ATTACHMENTS

The following attachments are required:

A. Finances

1. A copy of the organization's current IRS 501(c)(3) determination letter (or that of your fiscal agent) – active through the dates of October 1, 2008 – September 30, 2009.
2. Financial statements from the two most recently completed years, audited if available. Explain any significant changes in the budget (percent increase or decrease) that may have occurred during this time. Provide a copy of the organization's most recent IRS Form 990 tax return if audited financials are not available.
3. Organization budget for current year, including income and expenses. You may supply the organization's budget as currently prepared or use the format attached.
4. Program budget that includes income, expenses and pending sources of support. At least 80 percent of the applicant's total budget must be devoted to providing direct services or programming for disadvantaged children and families.
5. Itemized budget for the BDSG funds requested (\$2,000 – \$20,000).
6. A short narrative that explains anticipated sources of support planned fundraising campaigns or events, significant changes in the organization's operating budget, or other financial line items that may be unclear.
7. Recent brochure or other material describing applicant organization and its work.

B. Board of Directors

1. List the board members, responsibilities and affiliations. Describe the board's financial support of the organization (percent contributing and amount contributed) for the most recently completed fiscal year.
2. Describe the criteria for selecting board members.

C. Optional: letters of support, recent newspaper/magazine articles. *Please limit additional attachments to 10 pages or less.*

**PROPOSALS ARE DUE TO ASSOCIATED BLACK CHARITIES
NO LATER THAN 5:00 P.M. MAY 19, 2008**

PROGRAM/PROJECT BUDGET

This format is optional and can serve as a guide to budgeting. If you already prepare project budgets that contain this information, you may submit them in their original forms. Attach a narrative explaining the budget, if necessary.

Fiscal Year: _____

PROGRAM/PROJECT TOTAL EXPENSES

Item	Amount	%FT/PT
Salaries and wages (break down by individual position and indicate full- or part-time.)	\$	
_____	\$	
_____	\$	
_____	\$	
SUBTOTAL	\$	
Insurance, benefits and other related taxes	\$	
Consultants and professional fees	\$	
Travel	\$	
Equipment	\$	
Supplies	\$	
Printing and copying	\$	
Telephone and fax	\$	
Postage and delivery	\$	
Rent and utilities	\$	
In-kind expenses	\$	
Depreciation	\$	
Other (specify)	\$	
Total Expense	\$	

ITEMIZED BUDGET FOR BDSG FUNDS REQUESTED (\$2,000 - \$20,000)

Item	Amount	%FT/PT
Salaries and wages (break down by individual position and indicate full- or part-time.)	\$	
_____	\$	
_____	\$	
_____	\$	
SUBTOTAL	\$	
Consultants and professional fees	\$	
Travel	\$	
Equipment	\$	
Supplies	\$	
Printing and copying	\$	
Food	\$	
Postage and delivery	\$	
Rent and utilities	\$	
In-kind expenses	\$	
Other (specify)	\$	
Overhead (not to exceed 5% of direct costs)	\$	
Total Expense	\$	

ORGANIZATION BUDGET

This format is optional and can serve as a guide to budgeting. If you already prepare an organization budget that contains this information, you may submit it in its original forms. Attach a narrative explaining the budget, if necessary.

ORGANIZATION INCOME

Fiscal Year: _____

Source	Amount
<i>Support</i>	
Government grants	\$
Foundations	\$
Corporations	\$
United Way or other federated campaigns	\$
Individual contributions	\$
Fundraising events and products	\$
Membership income	\$
In-kind support	\$
Investment income	\$
 <i>Revenue</i>	
Government contracts	\$
Earned income	\$
Other (specify)	\$
_____	\$
_____	\$
_____	\$
Total Income	\$

ORGANIZATION EXPENSES

Fiscal Year: _____

Item	Amount
Salaries, wages and benefits	\$
Insurance and/or other taxes	\$
Consultants and professional fees	\$
Travel	\$
Equipment	\$
Supplies	\$
Printing and copying	\$
Telephone and fax	\$
Postage and delivery	\$
Rent and utilities	\$
In-kind expenses	\$
Depreciation	\$
Other (specify)	\$
_____	\$
Total Expense	\$
Difference (Income less Expense)	\$

2009 BALTIMORE DIRECT SERVICES GRANTS PROGRAM

PROPOSAL COVER PAGE 1 [REQUIRED]

APPLICANT ORGANIZATION: _____

HEAD OF ORGANIZATION AND TITLE: _____

FISCAL AGENT (IF APPLICABLE): _____

*INCLUDE A LETTER FROM YOUR FISCAL AGENT INDICATING ITS ACCEPTANCE OF
FIDUCIARY RESPONSIBILITY AND A COPY OF ITS CURRENT IRS DETERMINATION LETTER*

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE: () _____ EXT.: _____ FAX: _____

E-MAIL: _____ WEBSITE: WWW. _____

CONTACT PERSON: _____

TITLE: _____

ADDRESS (IF DIFFERENT FROM ABOVE): _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE: () _____ EXT.: _____ FAX: _____

E-MAIL: _____

NAME OF PROPOSED PROGRAM OR SERVICE: _____

COMPLETE THE FOLLOWING SENTENCE OUTLINING THE PURPOSE OF FUNDS:

"We are requesting funding to support. . ." _____

AMOUNT OF REQUEST: \$ _____

(\$2,000.00-\$20,000.00)

HAVE YOU EVER RECEIVED FUNDING THROUGH THE BALTIMORE DIRECT SERVICES
GRANTS PROGRAM? IF SO, PLEASE INDICATE GRANT NUMBER AND YEAR OF FUNDING.

GRANT NUMBER: _____ YEAR: _____

PROPOSAL COVER PAGE 2

[REQUIRED]

PLACE A NUMERAL IN THE BOXES BELOW TO INDICATE THE PRIMARY AND SECONDARY PROGRAM CATEGORIES THAT BEST DESCRIBE THE PROGRAM OR SERVICE FOR WHICH FUNDS ARE BEING SOUGHT: (CHOOSE NO MORE THAN 2 CATEGORIES)

- | | |
|--|---|
| <input type="checkbox"/> After-School/Summer Programs | <input type="checkbox"/> Mentoring |
| <input type="checkbox"/> Arts & Cultural Activities | <input type="checkbox"/> Recreation |
| <input type="checkbox"/> Community Development/Economic Development | <input type="checkbox"/> School-Based Initiatives |
| <input type="checkbox"/> Education | <input type="checkbox"/> Substance Abuse Prevention |
| <input type="checkbox"/> Employment Assistance/Job Training | <input type="checkbox"/> Violence Prevention/Community Safety |
| <input type="checkbox"/> Family Support | <input type="checkbox"/> Youth Development |
| <input type="checkbox"/> Health | <input type="checkbox"/> Other (Please Specify) |
| <input type="checkbox"/> HIV/AIDS (prevention, education, treatment) | |

THE PROPOSED PROGRAM OR SERVICE WILL SERVE (CHECK ALL THAT APPLY):

- Children (0–3) Youth (4–12) Teens (13–17) Young Adults (18–21) Families
 A Targeted Community or Population (i.e., Abused Children, Sexually Active Youth, Survivors of Trauma)

(Please Specify): _____

Enter the numbered areas (1–55) as defined in the Community Statistical Area chart that indicate your primary and secondary target service area(s) in Baltimore City for your proposed BDSG project. Please select no more than two areas. If your project service area is citywide, indicate with "all."

_____ _____

BEFORE MAILING, MAKE SURE THE FOLLOWING ARE INCLUDED (CHECK OFF):

- Copy of IRS 501(c)(3) determination letter for your organization or that of your fiscal agent (active through the dates of October 1, 2008–September 30, 2009).
- Proposal and attachments as outlined in our modified Common Grant Application.
- While the applicant seeking support through the Baltimore Direct Services Grants program may serve specific populations, the organization seeking funding does not discriminate in its policies, practices, or programs on the basis of race, color, national origin, sex, or sexual orientation.

Original plus four complete sets of your submission, including this cover page are due at Associated Black Charities before 5:00 p.m., Monday, May 19, 2008.

Please do not submit CDs, videotapes, three-ring binders, or original photographs/artwork.

For questions, please contact Yvette Larkin, Associated Black Charities, 443.524.7727.

Hard copies of the application can be obtained in the lobby of Associated Black Charities, 1114 Cathedral Street, Baltimore, MD 21201, or the Annie E. Casey Foundation, 701 St. Paul Street, Baltimore, MD 21202.