



Taos Community Foundation
Women Give Taos Impact Grant 2018-19

Proposal

Project Title: _____

1. Which WGT funding priority (ies) are you addressing?

- Life Skills /Employment, parenting, preparation and training
- Access to Educational Opportunity
- Emotional and physical health (include addiction and teen pregnancy)
- Healthy development and personal authority of young girls
- Violence - societal and domestic

2. Clearly outline the community need or issue addressed by your proposal and the population(s) who benefit.

3. Describe your action plan for addressing this need. How does your proposal address the selected WGT funding priorities?

4. What are the root causes, policies and other structural barriers affecting this issue, and how is your organization working towards addressing these barriers?

5. How are the people most affected by the issue you are addressing informed, involved and represented in your organization's program development, decision making, and outreach?

6. Is collaboration with other agencies anticipated? If so, please include the partner-agencies and provide a brief summary of the roles of each partner within the project.

7. Is this a time-sensitive project? If so, please outline the start and estimated completion dates

8. What is the desired outcome, or results to be achieved?

9. How many individuals do you anticipate will be served?

10. Results Based Accountability

How will outcomes be measured? –please identify one **key performance measure** that you will use to track your progress towards meeting your goals for each of the three questions below.

- a. What is your Performance measure for - How “much” did you do?

- b. What is your Performance measure for -How “well” did you do it?

- c. What is your Performance measure for -Is anyone better off?

Grantees will be asked to provide a report on these performance measures at the end of the grant period.

11. Please add two or three sentences summarizing your request, including highlights you wish to share with WGT members.

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Financial Information Page

- What is the organization's total operating cost?
- If project related, what is the total cost of this specific project?
- Is there other funding currently in place for the project?
- If so, what is the amount and source of that funding?

Additional financial information may be requested. Please do not submit documents unless requested.



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Non-Profit Documentation Checklist / Signature Page

Place a check in each box to certify that you have a current copy of these documents on file and can provide these documents if your Proposal is accepted for funding or additional review. **Do not send hard copies of the following items.** Please sign below.

- Board Contact List for Non-Profit Programs – indicating board members’ names, community affiliations and contact information.
- Organization’s most recent 990 filed with the IRS. Filing Year: _____
- Current Organizational Budget, Profit & Loss Statement **and** Balance Sheet.
- If you are not a 501(c) (3), you must have a Fiscal Sponsor/Agent, please provide the following:

Fiscal Sponsor Organization: _____

Is there a written sponsorship agreement in place? YES NO

By signing this Proposal, I am endorsing the accuracy of it and the commitment of my organization to implement the proposed scope of work as it is described.

Organization Name: _____

Executive Director

Date