

APPLICATION

Preview Form

This is an example of the application questions with which you will be presented. It is recommended that you compose the answers to the paragraph questions in a word processing program and then cut and paste that text into the online application.

Organization Information

***Legal Name**

(Text)(100 character maximum)

Instructions:

- Organization's Legal Name

AKA/DBA Name

(Text)(100 character maximum)

Instructions:

- If applicable, list your organization's "*Also Known As*" or the "*Doing Business As*" name

***Year Organized**

(Number)(4 character maximum)

Instructions:

***Address**

(Text)(100 character maximum)

Instructions:

***City**

(Text)(50 character maximum)

Instructions:

- Type the name in full (no abbreviation).

***State**

(Single-Select List)

- Iowa
- Nebraska

Instructions:

***ZIP**

(Text)(20 character maximum)

Instructions:

***County**

(Text)(255 character maximum)

Instructions:

- County of Organization

***Telephone**

(Text)(30 character maximum)

Instructions:

Fax

(Text)(30 character maximum)

Instructions:

Website Address

(Text)(100 character maximum)

Instructions:

***CEO/Executive Director**

(Text)(255 character maximum)

Instructions:

***Board Chair/President**
(Text)(255 character maximum)

Instructions:

***Board of Directors**
(File Upload)File Upload; 2572864 byte limit

Instructions:
• Upload a file with the names of your current Board of Directors and their professional affiliations by clicking the **Upload File** link below and attach your file in pdf, xls or xlsx format (or fax/mail a copy to IWF).

***IRS Tax Exempt On File**
(Yes/No)

Instructions:
• Does your organization have a copy of its IRS letter of tax-exempt status on file at IWF?

IRS Tax Exempt Letter Upload
(File Upload)File Upload; 3145728 byte limit

Instructions:
• If you do not have a copy of your IRS letter of tax-exempt status on file at IWF, upload a copy. Click the **Upload File** link below and attach your file in pdf format (or fax/mail a copy to IWF).

Please do not copy/paste quotation marks or bullets into the following paragraph fields. Quotation marks and bullets do not display correctly. You may fax, mail or email documents that you are unable to upload.

Instructions:

(No input required)

***Organization History**
(Paragraph)(2000 character maximum)

Instructions:
• Briefly describe the history of your organization.

***Financial Audit**
(File Upload)File Upload; 2621440 byte limit

Instructions:
• Upload a copy of your organization's most recent audit. Click the **Upload File** link below and attach your file in pdf format (or mail a copy to IWF). If your organization does not have audited financials, upload a copy of the most recent bank statements.

Organization Budget

(File Upload)File Upload; 1524288 byte limit

Instructions:

- Upload your organization's annual budget (including expenses and income) for the current program year or complete the attached template with your organization's annual budget numbers. If you upload your budget, ensure the document is no longer than 3 pages and that it is in doc, docx, pdf, xlsx or xls format (or fax, mail or email a copy to IWF).

An Organization Budget Template from IWF is available to download. **Right click [Organization Budget Template](#)** and "**Save Target As**" the template to your computer. Once you've completed it, click the **Upload File** link below and attach the template.

Contact Information

The contact information will help us determine who we can call or email if there are questions related to your application.

***Salutation**

(Text)(100 character maximum)

Instructions:

- Enter a salutation, examples: **Ms., Mr.**

***First Name**

(Text)(40 character maximum)

Instructions:

- Type your first name and capitalize the first letter only.

***Last Name**

(Text)(40 character maximum)

Instructions:

- Type your last name and capitalize the first letter only.

***Title**

(Text)(50 character maximum)

Instructions:

- Role within your organization

***E-mail Address**

(Text)(100 character maximum)

Instructions:

***Address**

(Text)(100 character maximum)

***City**

(Text)(50 character maximum)

***State**

(Single-Select List)

- Iowa
- Nebraska

***Zip**

(Text)(20 character maximum)

***Telephone**

(Text)(30 character maximum)

Other Phone

(Text)(20 character maximum)

Fax

(Text)(30 character maximum)

- Enter your primary e-mail address.

Instructions:

- Address

Instructions:

- Type the city in full - no abbreviation please

Instructions:

- State

Instructions:

- Zip

Instructions:

- Telephone

Instructions:

- Cell or other phone

Instructions:

- Fax

Proposal Information

***Request/Organization Name**

(Text)(200 character maximum)

Instructions:

- Enter organization name

***Project Title**

(Text)(255 character maximum)

Instructions:

- Enter the title of your grant request.

Instructions:

- Based on the type of support you are seeking, select the application type. Before selecting the type of application, ensure that you have read the Foundation's [Grant Application Policies and Procedures](#) to familiarize yourself with the requirements for each type of support.

***Request Type**

(Single-Select List)

- Capital
- General Operating
- Program

Instructions:

- What is the primary focus area your project

***Primary Focus Area**

(Single-Select List)

- Economic Development
- Education
- Healthy Families
- Other
- Place-making

addresses?

See our [Grant Application Policies and Procedures](#) for a description of these.

***Request Date**
(Date)

Instructions:

Instructions:
 • Grant funds cannot be used for expenses incurred prior to grant notifications. IWF will not fund past-incurred debt. Refer to our grant guidelines for notification dates.

***Project Start Date**
(Date)

Instructions:

Instructions:
 • What is the total dollar amount of the project? This amount must be reflected in your **Uploaded Budget**. For applications through the Multi-Year Funding program, please include the annual total of all of your Iowa-based programming.

***Project End Date**
(Date)

***Total Project Amount**
(Currency)(20 character maximum)

Instructions:
 • What amount of money are you requesting from the IWF?

***Request Grant Amount**
(Currency)(20 character maximum)

Instructions:
 • What percentage of the total project budget is the amount requested?

***Percentage of Your Total Project**
(Number)(3 character maximum)

Proposal Demographics

Description of the population served by your proposal request

***Number Served**
(Number)(15 character maximum)

Instructions:
 • Provide the total number of direct clients supported by this grant.

***Ethnicity**
(Percentage List)

- African American or Black
- African / Sudanese
- Native American
- Asian
- Caucasian or White
- Hispanic or Latino
- Other

Instructions:

- Provide a breakdown by percentage of the ethnicities that this proposal is designed to support. The total should add to 100%

***Geographic Focus Areas**

- PRIMARY FOCUS
- ----% Council Bluffs
- ----% Pottawattamie County (not CB)
- ----% Cass County, IA
- OTHER ELIGIBLE COUNTIES
- ----% Adams County, IA
- ----% Audubon County, IA
- ----% Carroll County, IA
- ----% Cass County, NE
- ----% Crawford County, IA
- ----% Douglas County, NE
- ----% Fremont County, IA
- ----% Harrison County, IA
- ----% Mills County, IA
- ----% Monona County, IA
- ----% Montgomery County, IA
- ----% Page County, IA
- ----% Sarpy County, NE
- ----% Shelby County, IA
- ----% Taylor County, IA
- ----% Washington County, NE
- OTHER
- ----% Other (specify in field below)

Instructions:

- Provide a breakdown by percentage (to the nearest whole percent) of the counties that this proposal is designed to support. The total should add to 100%.

See our [Funding Guidelines & Procedures](#) for a description of these.

Geographic Focus Area - Other
(Paragraph)(2000 character maximum)

Instructions:

- If you entered a percentage in "Other" for the Geographic Focus Area field, list the other counties and estimate the percentage.

Proposal Details

Please do not copy/paste quotation marks or bullets into the following paragraph fields. Quotation marks and bullets do not display correctly. You may fax, mail or email documents that you are unable to upload

Instructions:

(No input required)

***Statement of Need**

(Paragraph)(2000 character maximum)

Instructions:

- Briefly describe the need, problem or opportunity that your proposal addresses, utilizing available data and/or statistics.

***Goal(s)**

(Paragraph)(500 character maximum)

Instructions:

- Overall, what do you expect to accomplish as a result of this program / project?

***Activities original**

(Paragraph)(2000 character maximum)

Instructions:

- List the activities you will implement in order to accomplish the goals you have described above.

Instructions:

- What will you produce as a result of this proposal? Outputs are the volume of actions taken through your program, such as products created or delivered, number of people served, and activities and services carried out. They often link directly back to a particular activity. If this funding will support multiple programs or activities, break-out outputs accordingly.

***Outputs**

(Paragraph)(2000 character maximum)

Example: Our primary output is individual counseling sessions. We measure these by tracking (1) the number of sessions by client served and (2) the length of the sessions based on how much time the counselors worked with each individual in 15 minute increments. We

measured these two outputs through reports completed by counselors on a daily basis.

Instructions:

- Outcomes are meaningful social change for the population you are serving that result from your program's outputs.

Short-term outcomes are those that can be measured during the term of your grant (approximately one year). These are often a change in knowledge, skills, attitudes, behavior, condition, or status.

Long-term outcomes are the deeper changes that will result from attaining your short-term outcomes and extend beyond the term of the grant. This relates back to your program's purpose. Explain the reasons why you expect these long-term outcomes will result from successfully completing your short-term outcomes. If this funding will support multiple programs or activities, please break-out short- and long-term outcomes accordingly.

Example: During the grant, we want to understand to what extent the mentoring helped our clients quit smoking and deal with cravings. To understand both, we administered a survey to our clients to understand (1) if they quit

***Outcomes**

(Paragraph)(2000 character maximum)

during the grant period, (2) how confident they were in their abilities to deal with addictions and cravings, and (3) if they relapsed during the first three months after quitting and what triggered the relapse. In the long-term, we expect to see the health of our clients increase as they recover from the well-documented negative and lingering effects of smoking.

Instructions:

- What information will be most helpful for gauging whether or not your program is on-course? What targets have you set for yourself? Based on the outputs and short-term outcomes you identified above, what information will you collect and use for understanding what is working, planning, decision-making, and improving your program? What questions do you hope to answer? How will you answer them?

Instructions:

- Explain how your organization will continue to implement this program/project after IWF funding ends. If an IWF grant is not awarded, can you still proceed with the proposed program/project? Please explain.

Instructions:

- Describe your collaborative efforts with other organizations or

***Evaluation original**
(Paragraph)(2000 character maximum)

***Sustainability**
(Paragraph)(2000 character maximum)

***Collaboration**
(Paragraph)(2000 character maximum)

Collaboration Contact(s)

(File Upload)File Upload; 5024288 byte limit

***Project Manager Qualifications**

(Paragraph)(2000 character maximum)

Consultant(s) Role

(Paragraph)(2000 character maximum)

Photo/Line Drawing

(File Upload)File Upload; 2631926 byte limit

Proposal Budget

(File Upload)File Upload; 1224288 byte limit

groups, as it pertains to this proposal. Who are the other organizations you work with and how do they help you meet the goals and activities described above? Are these other organizations public charities?

Instructions:

- Provide contact information for collaboration used on this project.

Instructions:

- Briefly describe the project manager's qualifications.

Instructions:

- If you intend to use a consultant, describe his/her role and who the consultant is. If no consultants are used in this project, please write "none".

Instructions:

- If applicable, upload a photograph or line drawing of your proposal by clicking the **Upload File** link below and attach your file (or mail a copy to IWF).

Proposal Budgets

Instructions:

- A template is available to download. Right click on [Proposal Budget](#) and "Save Target As" to your computer. Once you've completed it, upload it by clicking the **Upload File** link below and attach your file in xls or xlsx format (or mail a copy to IWF). The proposal budget must be

submitted on the attached worksheet.

Authorized Electronic Signature

Check the box below to certify that the person submitting this request is authorized to represent the organization applying for a grant and that the organization is an eligible entity and not applying on behalf of an otherwise ineligible entity.

Additionally, the person certifies that if a grant is awarded to the organization, the grant funds will be used for the purpose outlined in the grant award letter and may not be expended for any other purpose without written approval from the Iowa West Foundation.

*Authorized Electronic Signature (Checkbox List)

- I certify that the information is accurate and agree to the conditions specified.

Instructions:

Instructions:

- An Authorization Form is available to download. **Right click** on [Authorization Form](#) and "**Save Target As**" the template to your computer. Once you've completed it, upload it by clicking the **Upload File** link below and attach your file in pdf or doc/docx format (or mail a copy to IWF). **Please ensure that you sign the document before you upload.**

Authorization Form
(File Upload)File Upload; 5485760 byte limit

If you are unable to upload signed document fax or mail the **signed** document.

[Need Support?](#)