** City Federation of Women’s Organizations**

 **WOMEN BUILDING COMMUNITY GRANTS**

 **WBC Grants up to $5,000**

 **Application Form for 2018 – 2019**

 ***Application Deadline Friday September 21 at 6 pm***

***All italicized text in this application should be erased from your submitted request (including this sentence!) Please maintain the format and page breaks as they appear in the application.***

*Please complete this Application in the format requested, following the same page layout, and submit electronically, attached as a pdf to a covering email to grants@womenbuildingcommunity.org. Alternatively, you may print the documents in the format requested and send them via postal mail to CFWO, 101 E. State Street, #200, Ithaca, NY 14850. You must include all required attachments. In your email/letter make sure the name of your organization and name of project to be funded are on the subject line.*

*Please save your document in pdf format using the title of the project in the file name. Please ensure the* ***project name*** *is at the top of each page of your document.*

*Please bundle ALL documents requested into ONE Pdf Binder. If you feel you have to send more than one document because of size of document, please give same file name plus # of document.*

*Please delete instructions and all unnecessary text from your document.*

*Please ensure all attachments also have the same file name.*

**Page 1. COVER PAGE:**

1. Up to $5,000 Grant Project Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Organization Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Organization’s Mission \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Organization’s Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Organization’s phone number and email address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Name of Executive Director/President \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Federal Tax ID number of applicant or of sponsoring organization \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Name of Executive Director/President of sponsoring organization if applicable

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Contact information for Executive Director/President of sponsoring organization

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Contact name, email address and phone number of **person responsible for this project and who will submit final report *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Total Project Budget \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Amount requested from WBC \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*We rarely have sufficient funds to award applications in full. If only partial funding is awarded how will your project be affected? How will you change the project or raise additional funds?*

1. Estimated number of women and/or girls impacted by this grant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Signature of Executive Director/President of applying organization

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Page 2 NARRATIVE:**

*Your narrative should answer the following points. Please do not exceed two pages.*

1. *Provide a brief paragraph describing the project for which funds are being sought, include project goals, history if appropriate, primary activities and target population.*
2. *Provide a statement of need for this project. Describe how the project will address this need and how it will improve the lives of women and girls.*
3. *Include names of organizations or individuals with whom you will collaborate on the implementation of this project and how they will be involved.*
4. *Include a timeline for the use of these funds.*
5. *Provide an explanation of the process that will be used to evaluate the project and to determine if the project has met its goals.*

**REQUIRED ATTACHMENTS:**

1. **Project Budget**

*A complete, itemized project budget for this grant that lists all project activities, the costs related to each activity, and the source of the funding used to support these costs, including this grant request. In-kind donations, matching funds and additional funds from other sources should be included in the budget.*

1. **List of the Organization’s current Board Members**
2. **Signed letter of agreement from fiscal sponsor if applicable**
3. If you received a **WBC Grant** during the 2017-2018 grant cycle, a final report for the project, or interim report if the project is not yet complete, must be attached to the 2018-2019 grant application. The report form can be found at http://www.womenbuildingcommunity.org/index.php?page=grants-information.

***In addition, letters of support from partnering organizations and other sponsors are always helpful. Please add these at the end.***