

Iowa Women's Foundation – 2017 Grant Application

Please review the IWF Grant Guidelines and follow them carefully as you complete this application form. They are available at <http://iawf.org/grantmaking/application/>

You must use **ACROBAT READER version 10 or higher** to complete the form.

All grant applications must be received in the IWF office **no later than 5:00 pm on Wednesday, May 31, 2017**

A. Project Information

A1. Project title		
A2. Contact person/ Project Director (individual who will serve as primary contact for the project)	a. Name	
	b. Title	
	c. Telephone	
	d. Email	
A3. Requested grant amount		
A4. Year covered by the grant		January 1-December 31, 2018
A5. Iowa counties served by this project (continue in the "Additional Information" section on page 8, if necessary)		

B. Organization Information

B1. Organization name		
B2. Organization tax ID #		
B3. Street address		
B4. City. State. Zip Code		
B5. Web address		
B6. Organization's Chief Executive Officer , if different from Contact Person in A3., above	a. Name	
	b. Title	
	c. Telephone	
	d. Email	
B7. Name of fiscal agent , if applicable		



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C. Project Summary

C1. Barrier(s) to the economic security of Iowa's women and/or girls that this proposal is designed to address (check one or more)

Employment Childcare Housing Education/training Transportation Mentorship

C2. Concise summary of the project (1200 characters or fewer)

D. Organization Background

D1. Please list and briefly describe the primary programs and/or services of the organization
(2000 characters)

E. Project Goals, Objectives, Activities, Timeline

E1. Why is the project needed and what is the overall goal? Please quantify those needs and/or problems as relevant to our community (1200 characters or fewer)

E2. List the main objectives to achieve the overall goal (1200 characters or fewer)

E3. Activities to be conducted to meet each of the objectives (1200 characters or fewer)

E4. Timeline for activities including publicity (1200 characters or fewer)

E5. Plan for evaluating short- and long-term success. Include measurable pre- and post-project indicators of success. (1200 characters or fewer)

E6. How the women/girls served by this project provide input to the project's planning and decision-making processes. (1200 characters or fewer)

- E7. If your organization has received funding from the IWF before, please indicate whether this proposal is for a continuation of the earlier project(s) and/or otherwise builds on that work in some way. Provide a summary in quantifiable terms of the outcomes of the earlier project(s) and how the results will inform the proposed activities. (2400 characters or fewer)**

F. Project Design and Community Partners

- F1. What other organizations are addressing the issues outlined in your proposal?
How does your project differ? (1200 characters or fewer)**

F2. List any community partners and indicate how you are collaborating. Please include contact information for each organization listed. (1200 characters or fewer)

F3. What are your plans for sustaining the proposed program/services after IWF funding? (1200 characters or fewer)

G. Project Budget

G1. Project title (same as A2, above)	
G2. Organization (same as B1, above)	

Please provide a budget **FOR THIS PROJECT ONLY** (not the entire organization).

G3. Expense categories	Source of funds for this project		
	Requested from Iowa Women's Foundation	Provided by another outside organization(s)	Provided from organization's own funds
a. Marketing expenses			
b. Office supplies			
c. Equipment expenses			
d. Phone/Internet expenses			
e. Food/Catering expenses			
f. Travel expenses			
g. Contract wage expenses			
h. Employee expenses			
i. Other costs (provide details in section G5)			
TOTAL EXPENSES			
G4. Funding sources	Requested from Iowa Women's Foundation	Provided by another outside organization(s)	Provided from organization's own funds
a. Amount requested from the Iowa Women's Foundation			
b. Amount provided by other organizations or donors			
c. Amount from organization's own budget			
TOTAL REVENUES (should match TOTAL EXPENSES, above)			

G5. Budget narrative. Please provide a breakdown of the specific expenses for each line in the budget. See grant guidelines for additional information on what to include. (4000 characters or fewer)

G6. If the Iowa Women’s Foundation cannot provide all of the support requested above, will the proposed project be able to move forward with partial funding? If so, what adjustments will you need to make?

H. ADDITIONAL INFORMATION

H1. Use this section to provide additional information that will be helpful in the review of the proposal.
See grant guidelines for additional information on what to include.

H2. How did you find out about the IWF grant program?

J. Demographics

For the group targeted by this project, not the entire service population of your organization.

J1. Estimate the total number of persons who will be served in each of the following groups:

_____ Women _____ Men
 _____ Girls (under 18 years old) _____ Boys (under 18 years old)

J2. Age group(s) that this project is designed to serve (please provide anticipated percentages)

_____ % Girls ages 0-5 _____ % Women ages 18-25 _____ % Women ages 62+
 _____ % Girls ages 6-11 _____ % Women ages 26-40
 _____ % Girls ages 12-17 _____ % Women ages 41-61

J3. Ethnic/racial constituencies this project is designed to serve (please provide anticipated percentages)

_____ % African-American/Black _____ % Latina/Hispanic
 _____ % Asian/Asian-American _____ % Native American/American Indian (specify) _____
 _____ % Anglo/Euro-American _____ % Other (specify) _____

J4. Disability status of the participants this project is designed to serve (please provide anticipated percentages)

_____ % With a disability _____ % Without a disability

J5. Income level(s) of the participants this project is designed to serve (please provide anticipated percentages)

_____ % Poverty level (at or below) _____ % Middle income _____ % Upper income
 _____ % Low income

J6. Neighborhood/geographic region this project is designed to serve

_____ % Neighborhood _____ % Urban _____ % Reservation
 _____ % Suburban _____ % Rural

J7. Other constituencies/groups this project is designed to serve (check all that apply)

_____ Boys/Men	_____ Persons who are physically challenged
_____ Displaced persons	_____ Refugees
_____ Persons for whom English is a second language	_____ Single mothers
_____ Incarcerated women/girls	_____ Teen mothers
_____ Lesbians/Bi-sexual/Transgender women	_____ Women in the trades
_____ Persons who are mentally challenged	_____ Women re-entering the workforce
_____ Non-traditional students	_____ Other (please specify):
_____ Displaced homemakers	
_____ Persons living with AIDS/HIV	