Standard Application Preview



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Applicant Organization: Organization Name

Project Title: Project Title

SECTION 1: CONTACT INFORMATION

Applicant Contact: Contact Name

Phone Number: Contact Phone Number Email: Contact Email Address

Executive Director: Executive Director Name **Email:** Executive Director Email Address

Is this correct?

If applicable, New Executive Director Name **Email:** If applicable, New Executive Director

Y/N

Mailing address we have on file for your organization: Organization Address

Phone Number: Organization Phone Number **Organization Website:** Organization Website

Does this request involve your organization acting as a Fiscal Sponsor? Y/N Error! Bookmark not defined.

Optional: Have you spoken to a member of the staff regarding this request? Y/N

SECTION 2: PROJECT SUMMARY

Which county does your program/project primarily serve? (select one)

Cuyahoga

Lake

Geauga

Multiple Counties

If your request serves a specific city or Cleveland neighborhood, please indicate below. (max 100 characters):

Please describe the project/program that would be supported by requested funds.

Identify specific activities that will take place, who will be involved in the project (staff, key partners, clients), how it will be implemented, and the timeline for completion. (Tip: think "who, what, when, where, how") (suggested character limit: 3,000)

What are the current needs, challenges, or recent events that led your organization to submit this proposal?

(i.e.: why are you hiring new staff/ or initiating this program, why is now the right time to do so, etc.). Where applicable, please identify what data, feedback, or information has been used to validate the community need which your project is trying to address. (suggested character limit: 5,000)

Identify up to three priority outcomes your organization plans to achieve with this project.

If awarded funding, you will be required to report on these outcomes. Include any relevant data and metrics used to indicate progress toward these outcomes. (suggested character limit: 3,000)

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Is there any other information not captured elsewhere regarding your organization, program, or project that you believe will help Cleveland Foundation staff understand this proposal? (suggested character limit: 3,000) Error! Bookmark not defined.

SECTION 3: PROJECT BUDGET

Requested Grant Period From Date, To Date

Requested Amount: (Enter whole numbers, no \$ or commas) **Total Project Budget:** (Enter whole numbers, no \$ or commas) **Total Org. Budget:** (Enter whole numbers, no \$ or commas)

Please share information about the overall budget of the project, including but not limited to, how it relates to the overall organizational budget, opportunities for earned income and sustainability of the project/program. (suggested character limit: 3,000 characters)

Project Expenses:

Provide a brief overview of what these funds would support. (suggested character limit: 3,000 characters)

Project Income:

Who are the other funders for this project? Specify the funder and amount, and whether the funding is anticipated, pending, or committed. (suggested character limit: 3,000)

Requested Expenses:

EXPENSES (CLEVELAND FOUNDATION GRANT)	CLEVELAND FOUNDATION REQUEST	OTHER FUNDING	DESCRIPTION
Total	\$0.00	\$0.00	
Salaries and Wages	\$0.00	\$0.00	
Consultants	\$0.00	\$0.00	
Travel	\$0.00	\$0.00	
Equipment	\$0.00	\$0.00	
Office Related Expenses	\$0.00	\$0.00	
Indirect Expenses (i.e. rent/occupancy, utilities, maintenance)	\$0.00	\$0.00	
Other	\$0.00	\$0.00	

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SECTION 4: DEMOGRAPHICS

Executive Director Racial demographic: (drop-down list)

RACIAL MAKEUP OF YOUR BOARD OF DIRECTORS		
Total	0 %	
White/Caucasian/European	0 %	
Black/African American/African	0 %	
Hispanic/Latino/Latinx	0 %	
Native American/Indigenous	0 %	
Asian/Asian American/Pacific Islander	0 %	
Multiracial/Multiethnic	0 %	
Additional Ethnicities	0 %	
Unknown or Decline to State	0 %	

Section 5: Required Attachments

Board List with Affiliations (Required)

Organization Chart (Required)

Organization Budget (Required)

Current audit report (Required) or most recent financial statement if no audit is available

Additional Attachments (Optional)

Fiscal Sponsor Agreement (if applicable) – signed and dated by both parties. For a template Click Here

Organization Profile Information

Organizational Mission Statement
Organizational History
Organizational Staff Statement
Key Programs/Services
Snapshot Last Updated
Auto-populated from Organizational Profile
Auto-populated from Organizational Profile
Auto-populated from Organizational Profile
Auto-populated from Organizational Profile