



United Way of Southwest New Mexico 2018 Funding Application

Funding Period: September 1, 2018 through June 30, 2019

Deadline: Friday, June 30, 2018 – 5:00PM

Please fill out the online form and upload required attachments via the United Way of Southwest New Mexico's website at <http://www.uwswnm.org/CIF2018>

Applications will not be accepted after the deadline.

If you are experiencing any type of technical issues, please feel free to call the UW office number at (575) 524-7561 or email Sara Armijo at sara.armijo@uwswnm.org

Section A: ORGANIZATION Information – General

Please provide the following information about the governing organization that is/will be responsible for providing information for which funding is being requested.

1. Organization Name:
Click here to enter text.
2. Physical Address:
Click here to enter text.
3. Mailing Address:
Click here to enter text.
4. Main Office Number:
Click here to enter text.
5. Main Contact Person and E-Mail Address:
Click here to enter text.
6. Grant Application Contact and E-Mail Address (if different from above):
Click here to enter text.
7. Web Site:
Click here to enter text.
8. Request Amount (Typical awards granted are \$2,500-\$10,000):
Click here to enter text.

Section B: ORGANIZATION Information – Governing Body

Please provide the following information about the governing body of the organization that is/will be responsible for providing information for which funding is being requested.

1. Is the organization a 501(c)3 in good standing?
 Yes No
2. How many staff members does the organization employ?
Click here to enter text.
3. Do any paid staff members of the organization sit as voting members on the governing board?
 Yes No
If answered YES, please state whom?
Click here to enter text.
4. What percentage of the Board of Directors contributed financially to the organization?
Click here to enter text.
5. Please provide the following as an attachment at the end of the application:
(A) Most current list of Board Officers and Directors with contact information and term limits.

Section C: ORGANIZATION Information – Financial Management

Please provide the following information about the financial management of the organization that is/will be responsible for funding that is being requested.

1. Was an audit or financial review completed by a Certified Public Accountant at the end of the last fiscal year?

Yes No

If no, please explain the reason for not having an audit or financial review.

[Click here to enter text.](#)

2. Has the organization had any audit exceptions in the past 3 years?

Yes No

If yes, please explain the circumstances and attach a copy of the audit exception page of the audit(s) in question.

[Click here to enter text.](#)

3. Are FICA and tax paid?

Yes No

If no, please explain the circumstances.

[Click here to enter text.](#)

4. What percentage of total organization budget is used for administrative costs and how is the administrative rate calculated?

[Click here to enter text.](#)

5. Please provide the most current version of the following financial documents as attachments at the end of the application:

(A) 990 Form

(B) IRS Determination Letter for 501(c)3 Status

(C) Financial Review or Audit

(D) Organizational Budget

Section D: APPLICANT Information

Note: Only ONE application request per organization.

Please provide the following information about the request for which the Organization is requesting funding. This information is intended to assist the Community Investment Committee in comparing programs.

1. What is your organization's mission statement?
2. Is this program directly related to Basic Needs, Education or Financial Stability?
 Yes No
3. Please check what **specific** area of Basic Needs, Education or Financial Stability priorities directly addressed, **check all that apply to the request:**
 - Basic Needs**
To improve the quality of life for children and families by linking them to vital community resources and services.
 - Education**
To decrease barriers to educational success by improving the quality of and access to supplemental supports.
 - Financial Stability**
To increase the number of opportunities for individuals and families to become economically self-sufficient.
4. Please provide a narrative explanation of the request as it directly relates to the selected area(s) above in 500 words or less.
[Click here to enter text.](#)
5. Please share the measurable purpose of this request. How was the local need identified? (Provide any relevant statistical data/research.)
[Click here to enter text.](#)
6. What strategies will be implemented in order to accomplish desired outcomes?
[Click here to enter text.](#)
7. How are the outcomes measured?

[Click here to enter text.](#)

8. Are there any collaborative efforts in conjunction with this request?

[Click here to enter text.](#)

9. If you are awarded funds for this project, how will these funds move this project forward? How will your organization and project be impacted if the funds are not awarded?

[Click here to enter text.](#)

10. Please attach a sample(s) of measurement tool(s) and a timeline at the end of application.

11. Use **Worksheet E1** to list **Service Recipient Demographics** related to providing this program and add behind Part A. Be as specific as possible.

12. Use **Worksheet E2** to list **Request Budget** related to providing this program and add behind Part A after E1. Be as specific as possible.

13. Please complete the **Certification and Approval Signature Form** with necessary signatures and attach at the end of the application. The form certifies that the proposal was considered and approved for submission by the requesting organization's Board of Directors and that all information is complete and accurate.

Section E: NON-ALLOCATION Feedback

This section is for United Way of Southwest New Mexico use only and will not affect the funding process.

1. If your organization previously applied for United Way Funding, whether awarded or not, how has the experience influenced your request?

[Click here to enter text.](#)

2. When you consider other funding proposal processes (outside of United Way), what has been the easiest application process you have experienced and why?

[Click here to enter text.](#)

3. What are your biggest leadership challenges and what can United Way of Southwest New Mexico do to help?

[Click here to enter text.](#)

4. What was your organization's greatest accomplishment in the last 12 months?

[Click here to enter text.](#)

5. What active collaborations are most important to your organization?

[Click here to enter text.](#)

6. If your organization could build an ideal partnership, what would that look like?

[Click here to enter text.](#)

7. What is the craziest idea you have to solve the biggest challenges your organization or your clients face?

[Click here to enter text.](#)