**2018**

** ­­**

**United Way of Southwest New Mexico**

**2025 Community Impact Fund Application**

Funding Period: July 1, 2025 through June 30, 2026

**Deadline: Friday, April 18, 2025 – 5:00PM**

Please fill out the webform application and upload required attachments via the United Way of Southwest New Mexico’s website at [https://www.uwswnm.org/CIF202](https://www.uwswnm.org/CIF2023)5

**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 Monica Whitman at monicaw@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.

1. Physical Address:

Click here to enter text.

1. Mailing Address:

Click here to enter text.

1. Main Office Number:

Click here to enter text.

1. Executive Director/CEO name and E-Mail Address:

Click here to enter text.

1. Program Manager name and E-Mail Address:

Click here to enter text.

1. Board Chair Name and email:

Click here to enter text.

1. Web Site:

Click here to enter text.

1. 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. How many staff members does the organization employ?

Click here to enter text.

1. 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.

1. What percentage of the Board of Directors contribute financially to the organization?

Click here to enter text.

1. Upload:
2. 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.

1. 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.

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

Click here to enter text.

1. Please upload the most current version of the following financial documents:
2. 990 Form
3. IRS Determination Letter for 501(c)3 Status
4. Financial Review or Audit
5. Organizational Budget
6. Budget Narrative: Describe the program budget. How will allocations from the Community Impact Fund be used as part of the larger organizational budget?
7. Use **Worksheet 2** to list **Program Budget** related to providing this program. Be as specific as possible.

**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. Please select the specific impact area that applies to Healthy Community, Youth Opportunity, Financial Security or Community Resiliency. **Check only ONE:**

[ ]  **Healthy Community**

To improve access to nutritious food and quality health education and services, so people have the resources they need to lead healthy lives.

[ ]  **Youth Opportunity**

To create pathways for young people to reach their goals, from early childhood education to college and career success.

[ ]  **Financial Security**

Connecting people to education, tools and job training so they have financial freedom and peace of mind.

 [ ]  **Community Resiliency**

Helping communities prepare for, prevent, and respond to challenges, from crisis support and disaster relief to environment protection.

1. Please provide a narrative explanation of the request as it directly relates to the selected area.

Click here to enter text.

1. 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.

1. What strategies will be implemented in order to accomplish desired outcomes?

Click here to enter text.

1. How are the outcomes measured?

Click here to enter text.

1. Did you receive funding in the previous cycle? If yes, please describe how the funds were used.

Click here to enter text.

1. How will your organization and project be impacted if the funds are not awarded?

Click here to enter text.

1. Use **Worksheet 1** to list **Service Recipient Demographics** related to providing this program. Be as specific as possible.
2. Please complete the **Certification and Approval Signature e-sign** with the necessary signatures. Your e-signature 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.

|  |
| --- |
| **Annual Program Grant Process Timeline** |
| **Phase 1: Grant Application** | March 13, 2025 | Grant application available |
|  | April 18, 2025 5:00 pm | **Due Date:** Completed Grant application(*late submissions are not accepted*) |
| **Phase 2: Panel Presentations** | May 8, 2025-Grant CountyMay 14, 2025-Dona Ana CountyTBD-Luna County | Grant Review Panels convene for agency presentations (All qualifying programs will be emailed regarding presentation times) Grant Review Panels score applications and recommend grantees. |
| **Phase 3: Allocations** | Week of May 19-23, 2025 | UWSNM Board reviews and approves amounts |
|  | Week of June 2nd | Award agreements are emailed via Adobe acrobat |
|  | June 20, 2025 | All agreements DUE |
|  | July 1, 2025 | 1st payment issued |
|  | January 30, 2026 | **Due Date:** Mid-Year Report/2nd payment issued |
|  | July 31,2026 | **Due Date:** Year-End Report |