

## **2021 DCWC Charity Grant Application Criteria and Guidelines**

All Grant Application submissions must be **postmarked by February 6, 2021 and must be in compliance** with the following Criteria and Guidelines.

- Your organization must qualify as a non-profit charitable organization as defined in Section 501(c)(3) of the Internal Revenue Code.
- Your organization must not participate in, support, or promote, any activity that is contrary to the teachings of the Catholic Church.
- Grant funds awarded must be used to provide assistance to satisfy a community need within the Miami Valley area.
- Your Grant Application must provide a compelling case for the value of supporting a specific religious, educational, humanitarian, or charitable Project within your organization.
- Grant funds awarded must be used for a specific Project; funds are not to be used for general or operational support or overhead.
- The Grant Application Form must be fully completed and submitted, as indicated.
  - If any required information is *not available*, indicate the specific reason why.
  - Attachments may be used as needed, for required information and documentation.
  - Any attachments must clearly indicate the Application Form item numbers associated, and must be included in the sequence indicated.
  - A specific URL link to particular required information is acceptable, to reduce the volume of paper in the submission.
  - *DO NOT* include extraneous information not specifically required.
- The Grant Application must provide Point of Contact (POC) information (name, title/position, phone number, Email, and mailing address) for the individual who will serve as the principal POC for the management and processing of the Grant.
- The Grant Application must be signed by the organization's Chief Executive Officer (or equivalent), confirming the accuracy of all information provided.
- The Grant Application POC must be prepared to provide any additional or clarifying information requested during the review process.
- Grant Award recipients must be prepared to provide all Grant funds expenditure receipts and associated information requested, throughout the Project.
- Grant Award recipients must be prepared to provide a report of successful completion at the end of the Project, and must agree to associated publicity regarding the Grant-funded Project.

**SCROLL DOWN** to the **2021 DCWC Charity Grant Application Form**

## **2021 DCWC Charity Grant Application Form**

Complete this application and submit it to:  
**Dayton Catholic Women's Club, c/o Grants Committee; 3913 Silver Oak Street; Riverside, OH 45424.**  
Application submissions must be postmarked by February 6, 2021  
and must be in compliance with all the Criteria and Guidelines indicated.

### **1. Organizational Information**

- 1.a. Organization Name \_\_\_\_\_  
Address \_\_\_\_\_  
Web Site URL \_\_\_\_\_
- 1.b. Is this a 501(c)(3) non-profit charitable organization serving the Miami Valley area? YES \_\_\_ NO \_\_\_
- 1.c. Does this Organization participate in, or promote, any activity that is contrary to the teachings of the Catholic Church? YES \_\_\_ NO \_\_\_
- 1.d. Employer Identification Number (EIN) \_\_\_\_\_
- 1.e. Management/Governance - Provide specific URL link to, OR list of, Board Members/Trustees, Officers.
- 1.f. Staff Members - # Paid Full-time \_\_\_\_\_; # Paid Part-time \_\_\_\_\_; # Volunteer \_\_\_\_\_
- 1.g. Affiliated with National/Regional Organization? YES \_\_\_ NO \_\_\_  
If Yes,  
1) Provide Name, Address, and Web Site URL.  
2) Indicate \$ Amount of Funds provided by National/Regional Organization, for current year and last year.  
3) Indicate % of Total Revenue which those funds provided, for current year and last year.
- 1.h. IRS Form 990 - Provide specific URL link to, OR copy of first five pages of, most recent IRS Form 990, 990-EZ, or 990-N.

### **2. Organizational Purpose**

- 2.a. Organization Vision and Mission - Provide specific URL link to, OR copy of, Vision and Mission Statements.
- 2.b. Services - Provide brief explanation (limit three sentences each) of top three services provided, and service area.
- 2.c. Population Profile - Provide brief description (limit one paragraph) of those directly benefitting from services.

### **3. Financial Information**

- 3.a. Annual Report - Provide specific URL link to, OR copy of, Organization's most recent Annual Report.
- 3.b. Most Recent Current Fiscal Year Budget - Provide specific URL link to, OR copy of, Organizational Budget for most recent current fiscal year, indicating major categories of Income and Expenses.
- 3.c. Most Recent Past Fiscal Year Budget - Provide specific URL link to, OR copy of, Organizational Budget for most recent past fiscal year, indicating major categories of Income and Expenses, and including Planned vs. Actual.
- 3.d. Funding Sources - Provide list (Source Name, \$ Amount, and % of Total Revenue) of top five primary sources of funding, for most recent current fiscal year and most recent past fiscal year.
- 3.e. Past DCWC Grant Awards - Provide bulletized list of DCWC Grants awarded to your Organization over past five years (2016 to 2020), and for each, indicate:
- 1) Year and \$ Amount;
  - 2) Project Supported;
  - 3) Project Goals;
  - 4) How Funds were spent, and any amount Over/Under Project Budget; and,
  - 5) Brief statement of Outcome/Success of Project.

**4. Proposed Project Information**

4.a. Proposed Project Summary - Provide brief Summary (limit two paragraphs) of specific proposed Project for which this Grant Application is requesting funds.

4.b. Proposed Project Details - Provide brief bulletized explanation (limit one page) of the specific proposed Project, addressing:

- 1) Why the Project is needed;
- 2) What the Project entails;
- 3) Population profile of those who will benefit;
- 4) Specific Project goals and outcomes;
- 5) Total \$ Amount requested, and makeup of \$ Amount;
- 6) Project Plan Timeline for overall Project and for expenditure of Funds; and,
- 7) Plan for determining Success of Project.

4.c. Impact if Not Funded - Provide brief explanation of specific impact to the community and to your organization, if DCWC does not fund, or only partially funds, this proposed Project.

4.d. Alternative Funding – Briefly indicate known alternative sources of funding for this proposed Project.

**5. Project Point of Contact**

Point of Contact (POC) - Provide contact information for the individual within your Organization who will serve as the principal POC for the management and processing of this Grant.

- 5.a. Name \_\_\_\_\_
- 5.b. Title/position \_\_\_\_\_
- 5.c. Phone number \_\_\_\_\_
- 5.d. Email address \_\_\_\_\_
- 5.e. Mailing address \_\_\_\_\_  
\_\_\_\_\_

**6. Organizational Signature**

Chief Executive Officer (or equivalent) - Provide contact information and signature for the individual within your Organization, whose signature confirms compliance with all Charity Grant Application Criteria and Guidelines, and the accuracy of all information contained in this Charity Grant Application.

- 6.a. Name \_\_\_\_\_
- 6.b. Title/position \_\_\_\_\_
- 6.c. Phone number \_\_\_\_\_
- 6.d. Email address \_\_\_\_\_
- 6.e. Mailing address \_\_\_\_\_  
\_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**(Printed Name)** \_\_\_\_\_

**(Title/Position)** \_\_\_\_\_