Community Grants Program Fall 2022

Community Foundation of Northern Illinois

Interim Report

Interim Report Instructions:
Applicant organizations must submit an interim report for each in-progress grant from CFNIL's Community Grants Program even if your new application is for a different program. Each application your organization submits during this cycle must include an upload of all interim reports. Use the field below to upload these reports. If you need to submit reports for multiple open grants, combine the reports into one document to upload. PDF format required. Interim reports should include:

1. Description of the charitable activity's progress
2. Description of any changes to the charitable activity since approval
3. Reason that a Final Report is not being submitted.

Please Note: If you are applying for the same charitable activity for which you are currently being funded, it's to your advantage to provide a more detailed report so that the reviewers can understand the current impact of your charitable activity.

For additional information, visit the *Final, Progress, and Interim Reports* section on CFNIL's Grant Resources webpage.

Interim Report Upload*
File Size Limit: 2 MB

Summary

Summary

Proposal Title*
Give your proposal a short, descriptive name.
Character Limit: 100

Support Type*
Select the Support Type. Refer to the Community Grants Guidelines for definitions of each Support Type. Your choice of Support Type will determine which questions appear in your application.

Choices
Program
Project
Event
Capital/Commodity

Brief Proposal Description*

In no more than two sentences, explain how the funds will be used and what will improve as a result of the charitable activity. Be as precise and economical as possible in your answer. It will be used for reports and other communications pieces.

Character Limit: 700

Request Amount*

What is the amount requested from CFNIL for the first year (or only year) of the proposal?

Character Limit: 20

Total Requested*

What is the total amount requested from CFNIL in this proposal? This will be the same as the Request Amount unless this is a multi-year request. For multi-year requests, add the amount of all years requested.

Character Limit: 20

First Year Cost*

What is the total cost for the first year (or only year) of this charitable activity, including those components that will not be funded by CFNIL?

Character Limit: 20

Total Cost*

What is the total cost for all funded years of this charitable activity, including those components that will not be funded by CFNIL? This will be the same as the total cost for the first year if this is not a multi-year request.

Character Limit: 20

Summary - Second Year

Second Year Request Amount*

What is the amount requested for the second year?

Character Limit: 20

Second Year Cost*

What is the total cost for the second year of this charitable activity, including those components that will not be funded by CFNIL?

Character Limit: 20

Summary - Third Year

Third Year Request Amount*

What is the amount requested for the third year?

Character Limit: 20

Third Year Cost*

What is the total cost for the third year of this charitable activity, including those components that will not be funded by CFNIL?

Character Limit: 20

Demographics

Demographics

Your responses below should be specific to this request, not your organization's overall demographics, unless the charitable activity impacts all of your clients.

Counties Served:

What percentage of the number served will be residents of the following counties? If you don't expect to serve any clients in a particular county, enter 0% in the corresponding box.

Example:
Boone
75%

Boone*
Character Limit: 5

Ogle*
Character Limit: 5

Stephenson*
Character Limit: 5

Winnebago*
Character Limit: 5

Other*
Character Limit: 5

Population Description*
Please describe the population you expect to serve through this charitable activity. Include items such as race/ethnicity, socioeconomic status, age, and gender. Exact numbers are not required, but if you have exact numbers please provide them. If you receive a grant, you will be asked to track specific demographic information for your final report.

Character Limit: 4000

Proposal Plan

Proposal Plan

Funds Needed*
When are CFNIL funds needed? Please provide a target date. Funds will not be available until after January 1st. CFNIL does not fund programs retroactively.

Character Limit: 10

Funds Expended*
When will CFNIL funds be expended? Please provide a target date.

Character Limit: 10

Detailed Project Description*
In detail, describe the major activities that make up this proposal. Include information such as frequency, location, duration, and sequence of these activities that will successfully address the community need.

Character Limit: 10000

Responsible Parties*
List names, job titles, and roles of staff/volunteers responsible for achieving proposal's goals.

Character Limit: 4000

Leverage Additional Funding
Will this grant assist your organization in seeking or securing other funding sources? If yes, how much and from whom? If no, leave blank.

Character Limit: 4000

Provide any external reports that support your proposal in the upload fields below. (If you have more than two documents, consolidate them into two files. PDF file format required.)

Report 1
File Size Limit: 2 MB

Report 2
File Size Limit: 2 MB

Provide any external links to websites or media files that support your proposal.

Web Address 1
Character Limit: 2000

Web Address 2
Character Limit: 2000

Additional Proposal Info
Use this space to clarify any part of the proposal that you feel needs further explanation.
Character Limit: 4000

Additional Uploads
Use this optional field to upload any additional documents that support your proposal.
File Size Limit: 2 MB

Proposal Plan - Photos - General - Reviewers

Click on the link below that corresponds to your committee to view photos for your requests. Search for the photo files for this request by looking for the file name that follows this naming convention: "{Organization Name} - {Project Title}".

Arts & Humanities
Career Pathways
Complementary Education
Health
Human Services I
Human Services II
Sustainable Communities
Youth & Families

Proposal Plan - Partnering with School District

School Pre-Authorization Forms*

Since you are part of or partnering with a school district, you are required to upload a School Pre-Authorization form. You can download the form here. BE SURE TO SUBMIT YOUR FORM TO YOUR PARTNER SCHOOL DISTRICT WELL IN ADVANCE OF THE GRANT DEADLINE. If you are partnering with multiple school districts, combined all forms into one PDF. If you are partnering with more than four school districts, include forms from the top four.

File Size Limit: 2 MB

Proposal Plan - Program

Sustainability Plan*

Describe your plan to sustain this program beyond the funding period of the proposal.

Character Limit: 4000

Proposal Plan - Direct Service

Hours per Client*

What is the projected average number of direct service hours provided to each client? Make sure to include the total number of hours per client, even if services are provided by more than one provider.

Character Limit: 20

Total Hours Provided*

What is the projected total number of direct service hours provided to clients? (Hours Per Client multiplied by Number Served.)

Character Limit: 20

Outreach Efforts*

Describe your organization's outreach, marketing, or recruitment efforts for this activity.

Character Limit: 4000

Proposal Plan - Project/Program/Event - Over $30,000

Mission Alignment*

How does this proposal align with your organization's mission and current activities?

Character Limit: 4000

Total Staff Hours*

Total number of staff hours that your organization will invest in this charitable activity.

Character Limit: 100

Staff Hours Calculation*

How did you calculate this number?* (Example: 2 hours per day x 4 days per week x 52 weeks).

Character Limit: 250

Total Volunteer Hours*

Total number of volunteer hours provided to this charitable activity.

Character Limit: 100

Volunteer Hours Calculation*

How did you calculate this number? (Example: 2 hours per day x 4 days per week x 52 weeks).

Character Limit: 250

Proposal Plan - Event

Anticipated Audience Number

If this is a performance-based event, please enter the total number of anticipated audience members. If not, leave blank.

Character Limit: 100

Proposal Plan - Collaboration

Collaborative Partners*

List each organization. Include a detailed description of the role(s) each organization will play and the resources each will contribute for the project. Identify the lead organization and provide a contact with phone number for each partner. (Resources equal funds, equipment, personnel, facilities, etc.)

Character Limit: 4000

Collaborative Data Collection*

What role will each organization play in collecting and measuring data for evaluation? (This answer should be consistent with your responses in the "Measuring Results" section below.)

Character Limit: 4000

Collaborative Data Sharing*

How will you share data and best practices within the collaboration?

Character Limit: 4000

Collaborative Reporting*

How and when will the collaboration report to the public?

Character Limit: 4000

Proposal Budget

Proposal Budget

Proposal Budget*

Upload your proposal budget here. PDF format required.

File Size Limit: 2 MB

Quotes

Upload any required quotes here. Consolidate all quotes into one document to upload. PDF format required.

File Size Limit: 2 MB

Budget Narrative*

Please use the Budget Narrative to explain how each revenue and expense item was calculated. If related items are combined in a line item, describe the component expenses. If you are unable to obtain a quote for an expense over $5,000, use the budget narrative to explain.

Character Limit: 5000

Community Need

Community Need

Community Need*

What community need or opportunity is your proposed activity addressing?

Character Limit: 4000

Number Served*

Total number of unduplicated people this proposal will serve. This includes any client who will receive services for this charitable activity. If this is a multi-year request, enter the number of people served during the first year.

Character Limit: 7

Number Served by Component*

How many people will be served by each component of this proposed activity? These numbers should add up to the total number of unduplicated people this proposal will serve above. Example 1: 75 fifth-grade students at ABC school will participate in one-hour reading discussion groups. 25 fifth-grade students at ABC School will receive one-on-one tutoring. Example 2: 25 youth cast members will perform. 200 audience members will enjoy the performance.

Character Limit: 4000

Community Need - Second Year

Number Served Year Two*

Total number of unduplicated people this proposal will serve in Year Two. This includes any client who will receive services for this charitable activity.

Character Limit: 6

Community Need - Third Year

Number Served Year Three*

Total number of unduplicated people this proposal will serve in Year Three. This includes any client who will receive services for this activity.

Character Limit: 6

Measuring Results - Program/Project/Event

Program Rationale*

Briefly explain how the activities described in this proposal will lead to the outcomes listed below. (Do not include your rationale within your Result Statements.)

Character Limit: 4000

New or Existing Charitable Activity?*

Is this charitable activity an existing or new activity for your organization?

Choices
New
Existing

Result 1*

The change or improvement that a charitable activity is intended to produce.

Character Limit: 1000

Indicators of Success 1*

The data collected to show evidence of change as a result of the proposed activity. This may include outputs and outcomes. Outputs may be used in an instance when measuring outcomes during the funding period (12 months) would be impractical.

Character Limit: 2000

Targets 1*

This does not refer to your target population. The target is expressed as a number or percentage. It is the quantity of the data that you are tracking in the Indicators of Success listed above that you want to surpass to consider the Result met.

Character Limit: 2000

Methods for Measurement 1*

How you will collect the data that shows evidence of change.

Character Limit: 2000

Benchmarks 1

A point of reference against which your results can be compared.

Character Limit: 2000

Second Result?*

Do you anticipate a second significant result? If this proposal is requesting more than $30,000 or is a multi-year grant, you must have at least two Results.

Choices
Yes
No

Measuring Results - Program/Project/Event - Result 2

Result 2*
Character Limit: 1000

Indicators of Success 2*
Character Limit: 2000

Targets 2*

This is NOT your target population.

Character Limit: 2000

Methods for Measurement 2*
Character Limit: 2000

Benchmarks 2
Character Limit: 2000

Third Result?*
Do you anticipate a third significant result?

Choices
Yes
No

Measuring Results - Program/Project/Event - Result 3

Result 3*
Character Limit: 1000

Indicators of Success 3*
Character Limit: 2000

Targets 3*
This is NOT your target population.

Character Limit: 2000

Methods for Measurement 3*
Character Limit: 2000

Benchmarks 3
Character Limit: 2000

Proposal Plan - Collaboration Over $30,000

Support Letters*
Please upload a letter of support from each of your partner organizations in the project. (If more than one letter, combine and upload as one document. For partnerships involving more than four additional organizations, submit letters from your top four partners. PDF format required.)

File Size Limit: 3 MB

Measuring Results - Program/Project/Event - Over $30,000

Long Term Results

What are your anticipated long-term results for this charitable activity? Long-term results likely would be achieved beyond the funding period. (If your long-term results do not differ from Results #1-3 above or if long-term results are not appropriate, you may leave this field blank.)

Character Limit: 4000

Measuring Results - Program/Project/Event - Existing Charitable Activity

Years in Operation*

How long has this charitable activity been in operation? (Expressed numerically in years.)

Character Limit: 100

Number Served Over Lifetime*

How many people have you served over the lifetime of this charitable activity?

Character Limit: 100

Results To Date*

What have been the results of this charitable activity to date?

Character Limit: 4000

Testimonials

If you have any testimonials from past participants of this charitable activity that support this request, upload here.

File Size Limit: 2 MB

Measuring Results - Capital Commodity

Positive Impact*

How will this purchase/improvement positively impact the way you serve your clients?

Character Limit: 5000

Criteria for Success*

What are your criteria for success? How will you demonstrate successful completion of this project?

Character Limit: 5000

Organizational Capacity

Organizational Capacity

Organizational Background

Organization Type*
Choices
501(c)(3) Nonprofit
Public University/College
Religious Organization
Unit of Government

Organization County*
In which county is your organization located?

Choices
Boone
Ogle
Stephenson
Winnebago
Other

Organization Facebook
Character Limit: 2000

Organization Twitter
Character Limit: 2000

Organization's Board of Directors*
Include a list of your organization's Board of Directors with affiliations and with the officers identified. You can either type this information in or upload a pdf.

Character Limit: 4000 | File Size Limit: 2 MB

AKA
AKA = Also Known As. This information can be automatically populated from your Nonprofit Profile on Guidestar.org. Applicants are encouraged to keep their profile up to date. If this information is not on your Profile, you may enter it.

Character Limit: 250

Mission Statement*
This information can be automatically populated from your Nonprofit Profile on Guidestar.org. Applicants are encouraged to keep their profile up to date. If this information is not on your Profile, you may enter it.

Character Limit: 10000

Year Founded*

This information can be automatically populated from your Nonprofit Profile on Guidestar.org. Applicants are encouraged to keep their profile up to date. If this information is not on your Profile, you may enter it.

Character Limit: 250

Current Programs*

You may either upload a description of your current programs, such as a brochure (PDF format required), or type in a description.

Character Limit: 4000 | File Size Limit: 2 MB

COVID-19 Impact*

In the past year, how has the COVID-19 Pandemic impacted your organization and the people you serve? Consider financial, health-related, programmatic, and other factors. Compare your current status to where your organization was at the height of the pandemic. Do you feel like your organization is recovering?

Character Limit: 4000

Additional Organizational Info

Use this space to clarify anything about your organization that you feel needs further explanation.

Character Limit: 4000

Year-to-Date Income Statement*

Attach your organization's year-to-date income statement compared to budget. PDF format required.

File Size Limit: 2 MB

Organization Financial Information $30,000 & Less

Please include your organization's completed 990 forms for your two most recently completed fiscal years in the upload fields below. (If your organization does not complete a 990 or 990-EZ, or has not yet filed their 990 for the most recently completed fiscal year, upload unaudited year-end financial statements.)

990 Most Recent*

Upload the statement for your most recently completed fiscal year here. PDF format required.

File Size Limit: 5 MB

990 Next Recent*

Upload the statement for your most recently completed fiscal year here. PDF format required.

File Size Limit: 5 MB

Additional Org Financial Info Under $30,000

Use this optional space to clarify anything about your organization's financials or financial documents.

Character Limit: 5000

Organizational Capacity Over $30,000

Organizational Background Over $30,000

Organization History*

Briefly summarize your organization's history.

Character Limit: 4000

Recent Accomplishments*

Describe your organization's recent accomplishments.

Character Limit: 4000

Number of Staff*

List the total number of staff, given in full-time equivalent (FTE) units. (For more information, visit FTE Calculation.)

Character Limit: 100

Organization Financial Information Over $30,000

Please include your organization's audited financial statements for your two most recently completed fiscal years in the upload fields below. (If your organization does not complete an audit of your financials, or has not yet completed your audit for the most recently completed fiscal year, upload your organization's most recently completed 990 forms,)

Audit Most Recent*

Upload the statement for your most recently completed fiscal year here. PDF format required.

File Size Limit: 5 MB

Audit Next Recent*

Upload the statement for your most recently completed fiscal year here. PDF format required.

File Size Limit: 5 MB

Additional Org Financial Info Over $30,000

Use this optional space to clarify anything about your organization's financials or financial documents.

Character Limit: 5000