**2017 LOI and Full Proposal Questions – Experiential Learning Grant Strategy**

**Letter of Inquiry Questions**

1. Program name
2. Requested amount
3. Requested grant period from\_\_\_\_ to \_\_\_\_
4. Organization budget total
5. Project budget
6. Name of Chief Executive Officer
7. Number of people on the organization’s Board of Directors
8. Percentage of people of color on the organization’s Board of Directors
9. Is this a minority or woman-run organization?
10. Does the organization have a policy which states that it does not discriminate against age, race, religion, gender, sexual orientation, disability or national origin?
11. Name of primary contact person for this request
12. Primary contact person’s phone number
13. Primary contact person’s e-mail address
14. When are funds needed? (MM/YYYY)
15. Select county served (Milwaukee, Ozaukee, Washington or Waukesha County)
16. Please describe how the project focuses on the arts, Science, Technology, Engineering or Math (STEM), or nature-based learning.
17. Explain how the project uses an evidenced-based strategy, which is a strategy informed by objective evidence, evaluation, or research.
18. Explain the target population that will benefit from the proposed project.
19. What are the long-term outcomes to enhance sustained knowledge gained during the experiential learning opportunity and how will it be measured?
20. How will program participants apply their experiential learning to improve proficiency in core academic areas?
21. Please describe how the project is a catalyst for advancing racial equity and inclusion in the greater Milwaukee area. Racial Equity and Inclusion means equal access and opportunity for all people, so all can reach their full potential and are no more likely to encounter barriers or benefits based on race or ethnicity.
22. How will students’ parents and/or caretakers be engaged to support their child’s experiential learning?
23. Briefly describe your organization's capacity to achieve the anticipated outcomes of the proposal.
24. Describe collaboration with other organizations. Include target population's role in project design.
25. Budget narrative (Describe the use of funds requested and other funding sources)
26. Upload project budget

**Full Proposal Questions**

1. Organization's total operating budget for the past fiscal year
2. Number of full-time equivalent people on the organization's staff
3. The percentage of full-time equivalent people of color on the organization's staff
4. Board Diversity:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | American Indian / Native American | Asian American / Pacific Islander | Black / African American | White | Latino |
| Number of |  |  |  |  |  |
| Percentage of |  |  |  |  |  |

1. Amount requested
2. Explain the need for and significance of the project. (300 words allowed)
3. Outline the strategy, methodology and timeline to be used in the development and implementation of the project. (300 words allowed.)
4. Describe the evaluation process and how the results will be measured. (300 words allowed)
5. List the organizations you are collaborating with on this project and describe how the collaboration will take place. (300 words allowed)
6. Describe the status of pending request(s) to other revenue sources. (300 words allowed)
7. Describe plans for ensuring continued funding after the grant period. (300 words allowed)
8. Explain how the GMF funding that you are requesting in this application will be used (300 words allowed)
9. Budget Detail
10. Please use this space to enter budget narrative information. Explain any expenses in the Other category.(150 words allowed)
11. The next few sections are project/program related questions.

Please complete the next few sections with estimated numbers about the population you anticipate serving. If the funding requested is for capital/equipment, please enter "0" in each section and complete the Outcomes Questions.

Population directly served by projectPopulation indirectly served by project

1. Age group of population being served

|  |  |
| --- | --- |
|  | Enter the #s you anticipate serving through this project |
| Birth – Age 5 |  |
| Children & Young Adults (6-17) |  |
| Adults (18-65) |  |
| Seniors (65+) |  |
| Total |  |

1. Gender of population being served

|  |  |
| --- | --- |
|  | Enter the #s you anticipate serving through this project |
| Male |  |
| Female |  |
| Total |  |

1. Race/Ethnicity of population being served

|  |  |
| --- | --- |
|  | Enter the #s you anticipate serving through this project |
| American Indian / Native American |  |
| Asian American / Pacific Islander |  |
| Black / African American |  |
| White |  |
| Latino |  |
| Total |  |

1. Income Level of Population to be served

|  |  |
| --- | --- |
|  | Enter the #s you anticipate serving through this project |
| Income level <200% of poverty level |  |
| Income level >200% of poverty level |  |
| Total |  |

1. Special populations to be served

|  |  |
| --- | --- |
|  | Enter the #s you anticipate serving through this project |
| With Disabilities |  |
| At-Risk Youth |  |
| Homeless |  |
| LGBT |  |
| Abused |  |
| Total |  |

1. Counties to be served

|  |  |
| --- | --- |
|  | Enter the #s you anticipate serving through this project |
| Milwaukee County |  |
| Ozaukee County |  |
| Washington County |  |
| Waukesha County |  |
| Total |  |

1. Outcomes Question

|  |  |  |
| --- | --- | --- |
|  | Enter each outcome | Enter # of clients you anticipate serving (“0” if no population is directly served) |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |
| 5 |  |  |
| 6 |  |  |

1. Proposals are considered incomplete if the following documents have not been submitted, preferably via email to CIAdmin@greatermilwaukeefoundation.org on or before the due date: - Year to date income and expense statement and balance sheet; - Most recent Form 990; - Most recent audited financial statements and notes