**2018 Third Cycle Thriving Communities Community Capacity Questions**

The purpose of focusing on community capacity is to **support** people in neighborhoods to work together, make well considered and collaborative decisions, develop a shared vision and strategy for the future and act over a period of time to make it real, all while building the individual skills and abilities of diverse participants and organizations.

One aspect of Community Capacity is community building, which supports the ability of residents and other stakeholders to identify priorities and opportunities and work to foster sustained positive neighborhood change.

**Grant Application Questions**

Listed below are the application questions. Use this list to prepare your answers prior to working through the application.

1. Project title
2. Requested amount
3. Project start date (MM/YYYY):
4. Project end date (MM/YYYY):
5. When are funds needed? (MM/YYYY):
6. Name of Chief Executive Officer
7. Chief Executive Officer’s title:
8. Chief Executive Officer’s e-mail address:
9. Is this a minority or woman-led 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. What is the percentage of people of color on your Board?
12. How many full-time equivalent people are on your staff?
13. What is the percentage of full-time equivalent people of color on your staff?
14. List names of current board members:
15. Board & Staff Diversity:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | American Indian / Native American | Asian American / Pacific Islander | Black / African American | White | Latino | Two or more |
| Number of Board |  |  |  |  |  |  |
| Percentage of Board |  |  |  |  |  |  |
| Number of Staff |  |  |  |  |  |  |
| Percentage of Staff |  |  |  |  |  |  |

1. Project contact person's name:
2. Project contact person's title:
3. Project contact person's phone number:
4. Project contact person's email address:
5. Organization's total operating budget for past fiscal year:
6. Organization's total operating budget for current fiscal year:
7. Project’s total budget:
8. Please indicate in which neighborhoods your project will be implemented:
* Harambee
* Metcalfe Park
* Muskego Way
* Sherman Park
1. Explain how you identified the need (s) of the target population that your project will address. In what ways was your project informed directly by the people you think will benefit from this project? (200 words allowed)
2. Describe what other groups and/or organizations you will work with to accomplish this project and their respective roles. (200 words allowed)
3. Describe your organization’s connection to the neighborhood. (200 words allowed)
4. How will members of the community you serve be engaged to support their own and their communities’ growth and development? (200 words allowed)
5. How will you ensure this engagement is valued within the project? (200 words allowed)
6. What are the accomplishments you would like to see happen in the lives of your program’s participants as a result of your services? (200 words allowed)
7. How will you know your project achieved the impact you anticipate? How will you know your project achieved the impact the program participants expect? (200 words allowed)
8. Explain how the project uses an evidence-informed strategy, which is a strategy informed by objective evidence, evaluation or research. (200 words allowed)
9. To what extent does the evidence-based strategy consider the cultural context of the people you intend to serve? By cultural context we mean the beliefs, world views, and daily realities of the people you intend to serve as expressed from their perspective, understanding that the people you intend to serve may not share the cultural context that the staff of your organization may have. (200 words allowed)
10. Describe how participants and the neighborhoods served will be informed of the project’s outcome. (200 words allowed)
11. How will you shift your conversation from fixing problems to supporting and building assets? (200 words allowed)
12. How will your project staff be supported to work authentically in terms of understanding and reconciling their own beliefs, norms and worldviews and those held by the participants or members of the community you work with? (200 words allowed)
13. What resources, program models, expertise, other staff capacities or organizational strengths does your organization have? (200 words allowed)
14. Budget Detail
15. Please use this space to enter budget narrative information. Explain any expenses in the Other category. (300 words allowed)
16. Describe the status of pending request(s) to other funding sources. (300 words allowed)
17. Describe plans for ensuring continued funding after the grant period. (100 words allowed)
18. 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 |  |
| Two or more races/ethnicities |  |
| 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