2024 COMMUNITY ACTION FUND GRANT

The United Way of Northern New Mexico Grant Application

* Indicates required question

01. Agency Information
   a. Agency's Name*
   b. Federal Tax Identification Number*
   c. Agency's Mailing Address*
   d. Agency's Phone Number*
   e. Agency's Web Address*
   f. Primary Contact Information (Include Name, Email, & Phone Number)*
   g. Organization's Mission Statement*
   h. Briefly describe organization's role in community*
   i. History of funding from UWNNM within the last 3 years*•

02. Program Information
   a. Program Name
   b. Amount Requested*
   c. What is the primary focus area of your funding request*•
   d. Mark only one
      ● Education / Youth Mentoring
      ● Behavioral Health / Parent Supports
      ● Food / Housing
      ● Senior Transportation
   e. One-sentence description of program requesting funding*(used for marketing purposes)
   f. Describe Program* Detail your plan and management of program
   g. Similar organizations/programs? Partnerships for target market?
   h. Goal for program this coming year specific to this funding request*
   i. Where do you see this program in five years?*

03. Clients Served – Community Impact
   a. Who are your program's target clients?* (Served in Los Alamos or Rio Arriba, Who are they in family and/or community)
   b. Define one, and no more than three, client outcome performance measures.*
   c. How many clients did you serve in 2023*
   d. 2024 Projected Demographics of Unique Clients Served
      i. Number of projected unique clients in Los Alamos for 2024*
      ii. Number of projected unique clients in Rio Arriba for 2024 *

04. Attachments
   a. Upload your Board of Directors list *
   b. Upload your Current Strategic Plan *
   c. Upload your most recent 990 *
   d. Upload your 501c3 *
   e. Upload your Current Organizational Budget *

05. Any comments you would like to address

Grading Criteria For Grants

		5 = High	4	3	2	1 = low
Primary Focus	Does the program recognize a need in our community in the following areas: Education/Youth Mentoring, Behavioral Health/Parent Supports, Food/Housing, Senior Transportation?	Straightforward evidence with supporting data that program/agency aligns.	Sufficient evidence with some supporting data that program/agency aligns.	Some evidence to support the agency/programs aligns.	Limited evidence to suggest agency/programs aligns.	Limited to no data/evidence to support alignment. No data showing correlation between United Way Funding priorities and agency proposal
Use of Funds	How confident are you the funds are being used for effectual capacity building activities for the identified significant need?	Straightforward evidence the request falls within effectual activities and expenses are delineated and timely.	Sufficient evidence the request falls within the effectual activities, sufficiently delineated expenses.	Some evidence the request falls within the effectual activities. Some expenses not explained.	Request has some components under the effectual activities, but it is unclear how the funds will be spent. Proposed budget does not delineate expenses.	Request is not an effectual activity, and/or there does not appear to be a plan for implementation.
Community Impact	How confident are you the funds will be used to increase the agency's quantifiable results either by serving existing clients more deeply, or improving continuous improvement at the program or agency level?	Straightforward evidence demonstrating the impact of capacity building grant – either more clients will be served, services offered will be expanded and a clear continuous improvement model is being developed/used.	Sufficient evidence demonstrating the impact - more clients will be served, or clients will be served more deeply as clearly defined in request.	Request supports the agency's impact either generally or broadly but there is limited evidence or data to describe increased clientele or continuous improvement.	Limited evidence to support the agency's overall impact will be improved and/or limited data to support the request will serve clients (either more or with deeper services).	Request does not support serving clients more deeply or in greater numbers. Request is generic, duplicative, and/or not aligned with the impact.
Plan Strength	How confident are you in the successful implementation of the project in terms of its strategic plan, goals, and projected outcomes?	Project plan is clearly defined in the request and results are achievable and measurable outcomes are evident.	Project plan is clear, and results have some achievable benchmarks. There is sound reasoning and some data for supporting measurable outcomes.	The project plan is somewhat clear. There is some sound reasoning but limited information for supporting measurable outcomes	There is limited evidence to suggest there is a project plan and/or a plan is referenced but information is limited for supporting measurable outcomes.	There is no evidence to suggest there is a project plan. Request provides limited information to support how the measurable outcomes would be improved.
Management Capacity	How confident are you in the management experience required for project success?	The project clearly defines Board experience, and level of participation is defined. Scope of volunteer participation and level of expertise is clear. Staff is equipped to convey delivery of the proposed outcomes.	Management has previous experience and appropriate subject expertise and capability to deliver the proposed outcomes.	Management demonstrates some experience and appropriate subject expertise to deliver the proposed outcomes.	Management lacks experience and appropriate subject expertise to deliver the proposed outcomes.	Management has little to no experience and no collaborative partnerships are evident nor defined to deliver proposed outcomes.