

Grants for BIPOC Leaders and Communities

Delaware Community Foundation

Organization Information

Primary Organization Name

Character Limit: 250

EIN

Character Limit: 250

Is this program fiscally sponsored by another organization?*

Choices

Yes

No

If applicable, please share more about the fiscal sponsorship.

If applicable, please list the organization that serves as fiscal sponsor. Please also upload documentation verifying your fiscal sponsor relationship.

(Please put n/a if this does not apply.)

Character Limit: 100 | File Size Limit: 1 MB

Is your Organization a 501(c)3 as designated by the IRS?

The Delaware Community Foundation only accepts applications from 501(c)3 nonprofits.

Choices

Yes

No

NTEE Code*

National Taxonomy of Exempt Entities (NTEE) is a classification system developed by the National Center for Charitable Statistics.

Please find the codes and descriptions here, and choose the code that is your organization's primary classification (this is also in a Guidestar profile, if your organization has one).

Choices

A - Arts, Culture & Humanities

B - Education

C - Environment

D - Animal-Related

E - Health Care

F - Mental Health & Crisis Intervention

- G - Voluntary Health Associations & Medical Disciplines
- H - Medical Research
- I - Crime & Legal-Related
- J - Employment
- K - Food, Agriculture & Nutrition
- L - Housing & Shelter
- M - Public Safety, Disaster Preparedness & Relief
- N - Recreation & Sports
- O - Youth Development
- P - Human Services
- Q - International, Foreign Affairs & National Security
- R - Civil Rights, Social Action & Advocacy
- S - Community Improvement & Capacity Building
- T - Philanthropy, Voluntarism & Grantmaking Foundations
- U - Science & Technology
- V - Social Science
- W - Public & Societal Benefit
- X - Religion-Related
- Y - Mutual & Membership Benefit
- Z - Unknown

Organization Mission Statement*

Character Limit: 1000

Organization Website

Character Limit: 2000

Organization's Annual Operating Budget*

Character Limit: 20

Proposal Information

Which goal best aligns with your grant request?*

Choices

- Build Capacity for BIPOC Leaders
- Support Community Driven Change

Support Community Driven Change

Program or Project Name*

Character Limit: 100

Program or Project Abstract*

Please include a brief description, including the need for the program or project, the population it will serve, goals and outcomes.

The project abstract may be shared with select DCF fundholders, after being vetted by the DCF / AAEFD Grants Committee, so please make it clear, concise, and compelling.

Character Limit: 1200

Desired Timeline*

Provide a high-level timeline to execute the program/project. If this is a one-year project, multi-year, seasonal etc... the more details you can provide, the better.

Character Limit: 750

Amount Requested*

Maximum Request: \$25,000

Character Limit: 20

Outcomes and Impact*

Please provide specific details on the outcomes/impact of this work for the communities you serve.

Be specific as possible on how the program/project will impact the community and in what ways. *e.g., provide entrepreneurial opportunities for minorities in your specific community (provide jobs for 20 community members for one-year in Southbridge Wilmington). Provide access to advocacy and civic leadership opportunities to reduce recidivism.*

For context, here are some examples of what grant funding could support:

- Grassroots organizing and advocacy efforts that aim to change policies and practices that negatively impact people of color, because of their race or ethnicity.
- Programs that alleviate the impact of race-based discrimination and disparities.
- Initiatives that improve economic well-being, such as increasing access to employment opportunities or access to education and professional development.
- Programs that prepare and empower communities to participate in decision making processes.

Character Limit: 5000

Population Served (Target Population)*

Define the target population your program or project is intended to benefit. Please include number and ages of participants, race/ethnic makeup information, and other relevant local data.

Character Limit: 2000

Population Served (Barriers)*

What are the barriers faced by this community and how will the program or project help overcome these barriers and increase access?

Character Limit: 2000

Program or Project Budget*

Character Limit: 20

Build Capacity for BIPOC Leaders

Summary Description*

Please provide a summary of the capacity building work you plan to pursue and **why it is critical for your organization.**

Some examples of what this funding supports are:

- Skill building, training, mentorship, etc. for existing, new, and emerging leaders of color.
- Skill building for board, staff, or volunteers of nonprofits that serve communities of color.
- Tools that strengthen your organization and allow it to more effectively and efficiently advance its mission, such as: Strategic planning, financial management, identifying a communications strategy, improving volunteer recruitment, ensuring thoughtful leadership succession.

Character Limit: 500

Desired Timeline*

Provide a high-level timeline to execute the capacity building work. Please elaborate if this is a one-year project, multi-year, seasonal etc... the more details you can provide, the better.

Character Limit: 1000

Amount Requested*

Character Limit: 20

Participants*

Be as specific as possible describing WHO will directly participate in the capacity building work. For example, an organizational leader, board member(s), staff member(s), etc.

Please also provide the following demographic information for those participating:

- Age
- Race / Ethnic Makeup

Character Limit: 750

Outcomes and Impact*

Please provide specific details on the outcomes/impact of this work for your organization and the communities you serve. Describe how the proposed work:

- Is responding to organizational needs
- Will improve the organization's ability to fulfill its mission
- Will impact the communities you serve (include the barriers they currently face, and how your organization will help to overcome them)
- Will create measurable change for your organization and community

Character Limit: 1000

Budget*

Please provide details about the expected costs related to this work. If you have quotes from consultants that would provide certain services, please share those amounts. Otherwise, please include estimates.

Character Limit: 20

Measuring Success and Other Funding

Measuring Success*

Throughout the grant year, the DCF will request a written mid-year update and a virtual end of year report. To prepare, please list bullets of ways your organization will measure success and evaluate the program. We will ask about progress toward these points in the mid-year and end of year report.

Character Limit: 1000

Substantiate Need*

Describe the specific uses of DCF funds for the program. If this is part of a larger or longer-term project, specify how DCF funds will be used within the phases of the project.

Character Limit: 1000

Other Funding*

Please include a list of all other funding sources for this project only (grants, gifts, in-kind donations, and loans), including the amount of the contribution.

Include requests that are pending, including the requested amount and anticipated decision date. Please also note requests that were pursued but not funded.

Character Limit: 1000

Diversity, Equity, and Inclusion (DEI)

The Delaware Community Foundation would like to collect demographic data on your Board of Directors and the population your organization serves.

Incorporating the values of Diversity, Equity, and Inclusion*

At the DCF, we are committed building opportunity for all. To be successful, we know that a focus on equity is crucial. The DCF has made several organizational commitments.

- We would like to hear from you on how your organization is incorporating DEI values:
- For example, do you incorporate the perspectives of the population served in program design and delivery?
- Has your organization hosted cultural sensitivity training for staff and/or board of directors?
- Is your organization seeking out cross-cultural experiences that encourage awareness of other cultures or spend a day in the life of the community members you serve?

Character Limit: 750

What are the demographics of your Organization's Board of Directors?

How many serve on your Board of Directors*

Character Limit: 20

Board of Director's Demographic: Gender Makeup*

Please share the gender breakdown makeup of your Board of Director's. e.g.: 4 men, 4 women, and 1 who chose to not self-identify.

Character Limit: 250

Board of Directors: Racial/Ethnic Makeup*

Please share the racial/ethnic makeup of the organization Board of Directors.

Choices

Black/African American
 American Indian/Alaska Native
 Asian American
 Native American/Other Pacific Islander
 Hispanic/Latinx
 Not Hispanic/Latinx
 White/Caucasian
 Other/Mixed Race/Ethnicity

Please note the number of Board of Directors that identify as a minority population*

Please note the number of Board of Directors that identify as a minority population; i.e.

- 2 identify as Black/African American
- 2 identify as Hispanic/Latinx
- etc...

Character Limit: 500

What are the demographics of those that you serve?

Population Served Demographic: Age*

Please share the ages of the population your organization serves.

Choices

- Birth to Five
- 5 - 12
- 13 - 18
- Young Adults (19 - 25)
- Adults (25 - 59)
- Seniors (60+)

Population Served Demographic: Race/Ethnic Makeup*

Choices

- White/Caucasian
- Black/African American
- American Indian/Alaska Native
- Asian American
- Native Hawaiian/Other Pacific Islander
- Hispanic/Latinx
- Other/Mixed Race/Ethnicity

Population Served Demographic: Gender Identity*

Choices

- Female
- Male
- Non-Binary
- Choose not to identify

Please list any goals related to DEI your Organization hopes to achieve in the future.*

If your organization does not have any active efforts that incorporate a DEI lens into your work, or you're looking to expand on your current work; please list any DEI goals your organization hopes to achieve in the future (e.g. developing a more diverse board of directors, conducting yearly cultural competency trainings with staff, active inclusion of diverse vendors, mechanisms for senior accountability for DEI performance, etc.).

Character Limit: 750

Required Attachments

Program Budget*

Please provide budget detail for the program for which you are applying, including what expenses are included in this grant request.

File Size Limit: 5 MB

Organization Budget*

Please provide budget detail for the organization, which should clearly include the program for which you are applying for this grant request.

File Size Limit: 5 MB

Board List*

Please upload a list of your organization's board of directors.

File Size Limit: 5 MB

IRS Determination 501(c) Letter*

File Size Limit: 3 MB

Additional Attachment (Optional)

Please upload a photo or other collateral that helps visually support the proposed project, please include a brief description of the attached photo. **Please note that these will be reviewed as a part of the evaluation process and may be shared with select DCF Fundholders.**

Character Limit: 100 | File Size Limit: 7 MB

Required Signatures

Signature of Applicant Organization's Executive Director/CEO**

By typing your name below, you confirm applicant organization does not discriminate in staffing or services on the basis of race, religion, gender, age, disability, national origin, or sexual orientation.

Character Limit: 50

Signature of Person Completing Application**

By typing your name below, you confirm applicant organization does not discriminate in staffing or services on the basis of race, religion, gender, age, disability, national origin, or sexual orientation.

Character Limit: 50

