# 2024 Caesar Rodney Rotary Foundation (CRRF) Grant

Delaware Community Foundation

## Organization and Project Information

Primary Organization Name Character Limit: 250

**EIN** *Character Limit: 250* 

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

The Caesar Rodney Rotary Foundation (CRRF) New Castle County Youth Empowerment Fund at the Delaware Community Foundation only accepts applications from 501(c)3 nonprofits.

Choices Yes No

Mission Statement\* Character Limit: 1000

#### Geographic Areas Served (list)\*

List the New Castle County, Delaware areas served. Please list specific communities.

Character Limit: 1000

Organization Website Character Limit: 2000

Project Name\* Character Limit: 100

### Project Description\*

Briefly describe the project. Character Limit: 2500

#### **Opportunity or Need**

Please describe why the project is necessary, and the opportunity or need it will address for youth and young adults (ages birth through 25 years) who are underserved and at risk for not having the skills and support for a self-sufficient future.

Character Limit: 3000

#### **Population Served\***

Define the target population your project is intended to benefit.

Please include number and ages of participants and other relevant local data.

What percentage of the participants are at risk?

How will you attract and retain participants? *Character Limit: 2000* 

#### Impact and Measures of Success\*

Describe the anticipated impact of the proposed project. How will success toward achieving that impact be measured?

Character Limit: 2500

Amount Requested\* Note: Maximum available is \$5,000 *Character Limit: 20* 

Total Project Budget\* Character Limit: 20

**Organization's Annual Operating Budget\*** *Character Limit: 20* 

Project Start Date\* Character Limit: 10

Project End Date\* Character Limit: 10

#### Collaborations\*

Please indicate any collaborators with whom you are working on this project.

Character Limit: 1500

### Funding

#### Substantiate Need\*

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

#### Character Limit: 1500

#### **Other Funding**\*

Please include a list of all other funding sources for this project only, 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* 

#### Partial Funding\*

How will your program be affected if it is **not** funded by the Caesar Rodney Rotary? How will your program be affected if it receives **partial** funding from the Caesar Rodney Rotary? *Character Limit: 1500* 

# 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. Please note that answers to these questions will not affect the eligibility of your proposal.

#### Incorporating the values of Diversity, Equity, and Inclusion\*

At the DCF, we are committed to 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

#### 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 provide the number for all board members. The total should equal the number in the previous question.

Gender Makeup	Number of
Female	
Male	
Non-Binary	
Choose Not To Answer	
Unknown/Not Tracked	
Total number of board members	

### Board of Directors: Racial/Ethnic Makeup

Please provide the number for all board members. The total should equal the number in the previous question.

Race/Ethnic Makeup	Number of
Black/African-American	
American Indian/Native Alaskan	
Asian American	
Native Hawaiian/Other Pacific Islander	
Hispanic/Latinx	

White/Caucasian	
Other/Mixed Race	
Total number of board members	

#### Demographics of those that you serve

#### Population Served Demographic: Age

Please provide an estimate of the age distribution of the population you serve. These entries are in percentages (%) and should equal 100%. If the answer is zero (0), please put 0 in that column.

Age Range	% (Percentage)
Birth to 5 Years	
5-12	
13-18	
Young Adults (Ages 19-25)	
Adults (Ages 25-59)	
Seniors (Ages 60+)	
Total (should add up to 100%)	

#### Population Served Demographic: Gender Makeup

Please provide an estimate of the gender makeup of the population you serve. These entries are in percentages (%) and should equal 100%. If the answer is zero (0), please put 0 in that column.

Gender Makeup	% (Percentage)
Female	
Male	
Non-Binary	
Choose Not To Answer	
Unknown/Not Tracked	
Total (should add up to 100%)	

#### Population Served Demographic: Race/Ethnic Makeup

Please provide an estimate of the race/ethnic makeup of the population you serve. These entries are in percentages (%) and should equal 100%. If the answer is zero (0), please put 0 in that column.

Race/Ethnic Makeup	% (Percentage)
Black/African-American	
American Indian/Native Alaskan	
Asian American	

Native Hawaiian/Other Pacific Islander	
Hispanic/Latinx	
White/Caucasian	
Other/Mixed Race	
Total (should add up to 100%)	

#### 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; 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**

Project Budget\* File Size Limit: 1 MB

Organization Budget\* File Size Limit: 4 MB

**Board List\*** Please upload a list of your organization's board of directors. *File Size Limit: 1 MB* 

#### IRS Determination Letter (501(c)3)\*

File Size Limit: 1 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: 100

### 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: 100