2026 Next Gen North Early Childhood Development (birth through age 5) Grant

Delaware Community Foundation

Organization and Program Information

Primary Organization Name
Character Limit: 250

EIN
Character Limit: 250

Mission Statement*
Character Limit: 1000

Total Program Budget*
Character Limit: 20

Amount Requested*
Maximum Request: $5,000

Character Limit: 20

Organizational Overview*
Provide a brief history of the organization, including when it was formed, the mission and major programs.

Character Limit: 1000

Organization's Annual Operating Budget*
Character Limit: 20

Constituency Served*
Describe the constituency and number of persons your organization serves annually.

Character Limit: 500

Service Area*
Choices
New Castle County
Statewide

Program Name*
Character Limit: 100

Program Description*
Briefly describe the early childhood development (birth through age 5) program to be funded, including its objectives, strategies, curriculum and anticipated benefit to the community.

Character Limit: 3000

Is this program currently operational and when was it established?*
Character Limit: 300

Indicate the location of the program and accessibility to those it is serving.*
Character Limit: 450

List staff members who will be implementing the program.*
Include titles, roles and professional training.

Character Limit: 400

Target Population*
Define the target population your program is intended to reach and describe how you will raise awareness among this population. (Include number and ages of people.)

Character Limit: 600

Collaborations*
Do you expect to collaborate with other organizations? If so, provide details of that collaboration.

Character Limit: 600

Program Goals*
What are the program goals? Provide specific evaluation tools and processes that will be used to measure the short and long term success of your program.

Character Limit: 1200

How will Next Gen North funds be used?*
Character Limit: 1000

What are the plans for the program once Next Gen North grant funds have been exhausted?*
Character Limit: 1000

Funding

Specify opportunities for leveraging or matching grants (include fees and government income).*

Character Limit: 1000

Other Funding Requested*

List requests in connection with the program to other sources and dollar amount requested, as well as the status of the request:

Character Limit: 750

Other Funding Received*

List other funding already received for this program (i.e. components of program budget).

Character Limit: 750

Specify the impact if Next Gen North funding is denied.*

Character Limit: 750

Specify the impact of partial Next Gen North funding.*

Character Limit: 750

Demographic Data

The Delaware Community Foundation would like to collect demographic data on your Board of Directors. Please note that answers to these questions will not affect the eligibility of your proposal.

Demographic Data

At the DCF, we are committed to building opportunity for all. The DCF has made several organizational commitments to this end and we'd like to hear from you on how your organization is thinking about this:
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: 2500

How many serve on your Board of Directors?*

Character Limit: 25

Gender Identity (#)

	Board Members	Staff	Senior Staff
Female			
Male			
Non-binary			
Decline to state			
Unknown			

Race & Ethnicity (#)

	Board Members	Staff	Senior Staff
Asian American/Pacific Islanders/Asian			
Black/African American/African			
Hispanic/Latino/Latina/Latinx			
Native American/American Indian/Indigenous			

White/Caucasian/European			
Multi-Racial/Multi-Ethnic (2+ races/ethnicities)			
Decline to state			
Unknown			

Required Attachments

Program Budget (one page)*

File Size Limit: 1 MB

Organization Budget & Most Recent Balance Sheet*

File Size Limit: 4 MB

Board List*

Please upload a list of your organization's board of directors, including name and affiliation.

File Size Limit: 1 MB

501(c) Letter

You must upload your 501c3 letter if you received your tax-exempt status AFTER January 1, 2025. If before that date, you may skip this step. Thank you.

File Size Limit: 2 MB

Payment Processing

Grants will be processed through Direct Payment via ACH transfer. Please complete the fields below to allow the Delaware Community Foundation to award grants to your organization.

Authorization of Payment*

I (we) authorize the Delaware Community Foundation ("Company") to electronically debit my (our) account (and, if necessary), credit my (our) account to correct erroneous debts as follows:

Choices
Checking Account
Savings Account

Attach Bank Details (Cancelled Check or Letter from Bank)*
Please attach **either** a cancelled check or a letter from the bank verifying your account number. This will allow for accuracy of bank details and for efficient payment processing.

File Size Limit: 8 MB

Signature: Agree and Approval for Payment Processing*
I (we) understand that this authorization will remain in full force and effect until I (we) notify COMPANY in writing that I (we) wish to revoke this authorization. I (we) understand that COMPANY requires at least 5 business days prior notice in order to cancel this authorization.

Character Limit: 100

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