

Hawai'i People's Fund Emergency Grant Application

Cover Sheet

You may type or write clearly on this form, or retype, making sure that all questions are answered.

Date of Application:

Organization Name:

Project Title: (if applicable)

Contact Person (key responsible party):

Address:

City State Zip:

Phone: (day)

(evening)

Fax:

E-mail:

Organizational web site address:

Grant Request Amount: \$

Organization's Fiscal Status

A Do you have IRS tax exempt status? circle one Yes No

If **Yes**, please attach one copy of your IRS determination letter

B Is there a bank account in organization's name circle one Yes No

If **No**, please include information on a fiscal sponsor below and attach a letter of permission from fiscal sponsor and **one** copy of their IRS letter.

Fiscal Sponsor Organization:

Contact Person & Position:

Address:

Phone/s:

E-mail:

Prior Funding

Have you previously been funded by HPF ? circle one Yes No

If **Yes**, Give Year:

If **Yes**, have you submitted a Grant Report? circle one Yes No

An overdue Grant Report may jeopardize funding.

Our organization would be interested in training and technical assistance in the following areas (check all that apply):

Grantwriting

Board Development

Fundraising

Digital Technology

Leadership Development

Group facilitation

Communications & Media

Organizational Dynamics

Community Organizing

Other: _____

Political and Social Analysis

By applying for this grant, we certify that our group will not discriminate against any person associated with the group on account of sex; race; ethnicity; national origin; religious belief; political affiliation; physical or mental disability; economic status; parental, marital or domestic partnership status; age; sexual orientation; gender identity; or gender expression.

Narrative

Please be sure that the following four (5) questions are addressed. Please be as succinct as possible. Do not write over 5 pages.

A complete application includes Cover Sheet, Narrative, ***and*** Budget with Narrative.

Emergency requests will receive the fastest attention if sent by e-mail to peoples@lava.net.

- a) What is the nature of this emergency? Why were you unable to apply during the last regular grantmaking cycle? The next regular grantmaking cycle?
- b) Describe the organization and/or the specific project for which funds are being requested.
- c) Who is primarily responsible for the project and its implementation. Describe his/her/their qualifications.
- d) If other groups are involved in the project, list them and describe the collaborative or coalition building efforts.
- e) In what ways, specifically, does the project address social change? How does this work help to forge a stronger movement for justice?

Project Budget

The budget is another means of describing the project and reflecting its goals. To prepare a budget, the group must determine what it wants to achieve and then realistically estimate all the costs involved, leaving some margin for the unexpected. Likewise, all the income should be estimated as carefully as possible.

You must also submit a Budget Narrative. The Budget Narrative clarifies your figures.

For example:

- Personnel \$1,000—part-time coordinator at \$500/month for 2 months
- Meetings \$400—room costs \$200 to rent for one full day plus \$50 for food; some food will be donated
- Printing \$400—we will prepare packets for each of the estimated 100 conference participants at \$3 each; print 1,000 advance flyers to announce the conference at \$.09 each.

Be sure to state your full organizational budget total on the cover page.

Realistic financial estimates will inspire confidence. This suggests you have prepared carefully. Those reviewing the proposal will study your budget.

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593-9969 • peoples@lava.net
www.hawaiipeoplefund.org
www.changenotcharity.org

HAWAI'I PEOPLE'S FUND

____ ORGANIZATIONAL BUDGET

____ PROJECT BUDGET

Submit BOTH if applicable.

If you already prepare a budget that is similar to this format, please feel free to use it.

For Fiscal Year Beginning (month/date): _____

| | | | | |
|---|--------------------|------------------|--------------|---|
| Name of the organization: _____ | | | | |
| INCOME | Anticipated | Committed | Total | Tips for Budget Narrative |
| Government Grants | \$ | \$ | \$ | Specify sources, if applied for, proposal in progress, or committed |
| Foundations* | | | | |
| Corporations* | | | | |
| Religious Institutions* | | | | |
| United Way/other campaigns | | | | |
| Individual Contributions | | | | How will these be solicited? |
| Fundraising Events/Products* | | | | Describe what, if tested. |
| Membership Income | | | | Describe if applicable |
| In-kind support | | | | Donated goods or services |
| Other* | | | | Be as specific as possible |
| | | | | |
| | | | | |
| TOTAL Organizational Income | | | \$ | |
| EXPENSES | | | | |
| | | | Total | |
| Salaries and Wages | | | \$ | List names, titles, salaries Full- or part-time |
| | | | | |
| Fringe Benefits & Payroll Taxes | | | | |
| Contract Services/Professional Fees* | | | | Describe roles, who, costs |
| Insurance | | | | Describe |
| Taxes | | | | As applicable |
| Rent & Utilities | | | | |
| Equipment | | | | Be as specific as possible |
| Supplies | | | | Be as specific as possible |
| Staff/Board Development | | | | Be as specific as possible |
| Travel/Related Expenses | | | | Be as specific as possible |
| Printing & Copying | | | | What? How much? How used? |
| Telephone/Fax/Internet Service | | | | |
| Postage & Delivery | | | | |
| Other* | | | | Be as specific as possible |
| | | | | |
| TOTAL Organizational Expenses | | | \$ | |
| | | | | |
| NET INCOME (Income Less Expense) | | | \$ | |