**GRANT APPLICATION**

**Application Deadline: June 16th, 2023**

**Eligibility**

* Have 501(c) (3) tax-exempt status as defined by the Internal Revenue Service\*.
* Programs must primarily serve women in the greater High Point community, including Archdale, Trinity, Thomasville, and Jamestown.
* Programs should pertain to one or more of Women in Motion’s four identified areas of need. The primary desired outcome is to improve the personal, economic, or professional development of women in the workforce. A secondary desired outcome is to increase the number of women willing and able to take on leadership roles in the communities we serve. We welcome pilot programs that target under-represented women in the community.

Women In Motion seeks to partner with community organizations to create solutions that will enable women in the workforce to ensure economic and professional growth leading to additional leadership in our communities. Our areas of focus are:

* **Education**: Women need additional education to help them negotiate and advocate for themselves and their families.
* **Mentorship**: Women need better systems for networking and encouraging growth in each other.
* **Resources:** Women, especially women small business owners, expressed a need to tap into resources that already exist in the community in order to increase their professional and business success.
* **Wellness**: Women seek to balance personal wellness and professional success with professional and family demands.

**Application and Document Submission Checklist:**

* **Complete and submit “General Information,” “Program/Project Information,” and “Budget Request”**
* **Include a copy of your IRS determination letter or proof of charitable status if classified as a church or school**
* **Include a copy of the most recently filed 990 tax return or postcard**
* **Include a balance sheet and income statement (P&L) for your last fiscal year and current year-to-date**
* **Include a list of your Board of Directors**

All documents must be submitted via email to [info@womeninmotionhp.org](mailto:info@womeninmotionhp.org%20) in one of the following formats: Word or pdf. Image files will not be accepted.

**All applications must be submitted by email no later than 5 p.m., June 16, 20223**

\*Qualified non-profit organizations are organized under North Carolina General Statutes chapter 55A or comparable statute of another state and are recognized by the Internal Revenue Services as an exempt from income tax under section 501(a) and 501(c)(3) of the Internal Revenue Code of 1986 [the “Code”] and to which tax-deductible contributions may be made under section 107(c)(2) of the code.

**PLEASE COMPLETE THE FOLLOWING:**

**General Information:** *Please check one*: ☐NEW Program/Project ☐EXISTING Program/Project

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| Organization Name: |  |
| Complete Mailing Address: |  |
|  |  |
|  |  |
| Organization Phone Number: |  |
| Website address: |  |
| Contact Name and Title: |  |
| Contact’s email address: |  |
| Contact’s phone number: |  |
| Executive Director’s name: |  |
| Executive Director’s email address: |  |
| Board Chairman’s name: |  |
| Board Chairman’s email address: |  |
| Project Title: |  |
| Priority Area(s) Addressed: |  |
| Total Project Cost: |  |
| Amount Requested: |  |
|  |  |
| Executive Director’s Signature: |  |
|  |  |
| Board Chairman’s Signature: |  |

**Program/Project Information:**

**In a separate document, using a maximum of 5 pages, provide thorough descriptions of the following:**

* 1. **Organization:** Describe your organization’s mission, its work in High Point, Archdale, Trinity, Thomasville or Jamestown, and the populations you serve.
  2. **Need:** Describe the need for this proposed project/program, including relevant supporting evidence and how the program has been designed to meet the specific needs of women in one or more of the four identified areas of need listed above.
  3. **Capacity:** Describe your organization’s capacity to serve women in the workforce and how it fits with your

organization’s mission. List past or current programs serving women in your organization.

* 1. **Target population:** Identify the target population of the proposed project/program. How will you recruit participants? How many participants do you plan to serve with this grant?
  2. **Implementation:** How will you execute the program? Please include the specific sequence of activities necessary, a timetable, and relevant staff and volunteer descriptions.
  3. **Describe the specific activities and strategies that will take place in this project**: Does the person/people administering this program have in-depth knowledge of the population being served? Please explain. What is the start and end date of your project?
  4. **Outcomes:** What are the main goals you have for your program? How will you measure the success of your program, and what tools or tactics will you use to measure success?
  5. **Sustainability:** Does your organization intend to sustain this project/program in the future? If yes, please explain. **Multi-year requests will NOT be considered.**
  6. **Semi-Finalist Interviews:** Semi-Finalists will be notified on June 30th. Please hold the dates July 10th and 11th for semi-finalist interviews.

**Budget Request:**

You must submit a line-item budget request. You may use the template below or attach your own budget document. Although your total project budget may exceed your total request to Women in Motion, your total grant request should not exceed $10,000.

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| Source of Project Income/Funds: | Project Income/Funding: |
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| WIM Grant Request:  (Cannot exceed $10000) |  |
| Total Project Income/Funds: |  |

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| Description of Project Expenses: | Project Expenses: |
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| Total Project Expenses: |  |

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| --- | --- |
| Net/Project Balance:  (Total Income – Total Expenses) |  |