



---

## **SUGGESTIONS FOR COMPLETING THE ONLINE APPLICATION**

---

Huey and Angelina Wilson Foundation requires online submission of all grant applications. Following these suggestions for submission is a pdf sample of the application. Please note that the Foundation will not accept paper or e-mailed copies of this application. Only applications submitted through the grantee portal will be accepted.

### **Creating Your Application**

- It is strongly recommended that you review the complete application before getting started to understand the flow of information requested. Once understood, you may wish to type your grant request in a text document, such as Microsoft Word, in order to have a backup copy. Once complete, cut and paste your responses to the appropriate response field in the application. All applications are to be made via the Online Grant Portal.
- Please note that many items have word limits. There is a word counter beneath the entry field. Do not retype the application questions in your responses as this will waste valuable response space.
- All information in the application must be in text format without bullets or tables. Please use numbers or asterisks instead of bullets.
- Be sure to spell check the application prior to submitting. This information will be used on all organizational documents and presented to the Foundation's Board of Trustees. There is a spell check feature in the application.
- Save your application from time to time during completion. Please note that the system does have a "time out" feature, and you may lose any unsaved work.
- Press "Review My Application" before submitting to ensure that all fields are completed appropriately. If any changes are made to the application during the "Review" step, remember to press "Update" to ensure changes are saved.

### **Application Attachments**

- Clearly title all tables and attachments with both the organization's name and the title of the attached document.
- Upload instructions are provided on the Attachments page.
- There are eight **required** attachments and one *optional* attachment.



## Account Login

- Safeguard your username and password, which were established with your initial grant request. Once established, your login will be used for all future reporting and requests.
- The Foundation's office does not have access to your password. We will be unable to supply it at a later date.
- It is advised that an organization uses a common account or shares the account information with others in the same office.
- Add mail@grantapplication.com and @hwilson.org to your safe senders list to ensure you receive all system communications.

## Retrieving Saved Applications

- Partially completed and saved applications can be retrieved by logging in to your grantee portal: [http://www.grantrequest.com/SID\\_771](http://www.grantrequest.com/SID_771).

## Required Reporting

- The reporting forms for both interim and final reporting will be available through your grantee portal 30 days before the reports' deadlines.
- The email and password used to create the account when the application was submitted will be needed to access the online interim and final report forms.



---

## ONLINE APPLICATION

---

### Before you Begin

Welcome to Huey and Angelina Wilson Foundation's online grant portal!

In August 2018, the Foundation introduced a new grant application form. We understand this application is structured a bit differently, and we know questions will arise. We are here to help. Please contact us for guidance or assistance.

#### General Advice

- Add mail@grantapplication.com and @hwilson.org to your safe senders list to ensure you receive all system communications.
- Review complete application before getting started to get an understanding of the flow of information you will provide in each question.
- Please use numbers or asterisks instead of bullets.
- Feel free to copy and paste as needed from any original or previous documents you may have created.
- Many items have word limits. There is a word counter beneath the entry field.
- Please check your typing. This is the information that will be used on all of your organizational documents and presented to the Foundation's Board of Trustees.
- Click the check mark icon to spell check your narrative, if applicable.

### Pre-Application Quiz

Is your organization classified as 501(c)3 tax-exempt by the U.S. Internal Revenue Service?

Please select the parish in which you will primarily provide services.

Please select the area of interest which best describes your project focus.

Please select the range that encompasses your request amount.



---

### Organizational Information

---

#### Organization Contact Information

Organization Name: \_\_\_\_\_ Legal Name (if different): \_\_\_\_\_  
Address: \_\_\_\_\_ Web address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Office Phone: \_\_\_\_\_

#### Organization's Primary Contact

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Title: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Phone (if different from Organization's phone number): \_\_\_\_\_

#### Project Contact - If different from above.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Title: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Phone (if different from Organization's phone number): \_\_\_\_\_

#### Other Contact - Grant Writer or other contact relevant to this request.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Title: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Phone (if different from Organization's phone number): \_\_\_\_\_



---

## Organizational Background

---

**1. What is your organization’s mission and vision?**

**100 words**

**Guidance:** *Mission is what you do, and vision is the end state you wish to achieve. Describe how your mission gives you focus and guides your actions and decisions.*

---

---

---

**2. Please provide a brief history of your organization.**

**250 words**

**Guidance:** *Be sure to include the following: number of years in service, number of employees, number of volunteers, number of board members, and number of participants served annually.*

---

---

---

---

---

---

**3. What is your total organizational budget?**

**Guidance:** *In dollars, indicate the total annual organizational budget for your most recently completed fiscal year.*

---

---

**4. Does your organization use a fiscal agent?**

*If yes, check the box and answer Question 5. If no, skip Question 5 and move to Question 6.*

Yes

**5. What is the name, Tax ID and address of your fiscal agent?**

**Guidance:** *Provide the official name and mailing address for your fiscal agent along with the nine-digit US Tax ID number of the 501(c)(3) non-profit organization for which you are making this application.*

---

---

---



**6. What have you achieved in the past three years for participants in your projects or programs that are most like the project or program proposed?**

**250 words**

**Guidance:** *Rather than describing your organization, please tell us how many participants have tangibly improved their behavior or condition through your efforts and in what way. Focus on the tangible human gains to which you have contributed for those you serve.*

---

---

---

---

---

**7. What uniquely qualifies your organization to implement this project now?**

**250 words**

**Guidance:** *Help us understand why you are the right group to be doing this work and why now is the right time to be doing it.*

---

---

---

---

---

---

**Overview and Financing**

---

**8. What is the title of this project or program?**

**10 words**

**Guidance:** *Provide only the title for the project or program for which you are requesting funding (no more than 10 words). You will have an opportunity to describe the project or program in detail later in the application.*

---

**9. What are your project's start and end dates?**

**Start Date:**

**End Date:**



**10. Briefly summarize your proposed program or project.**

**50 words**

**Guidance:** Provide a brief description of the project or program for which you seek support, including the overall purpose of the project or program. Details of your project will be described in the following questions.

---

---

**11. Please select the area of focus to which your program/project aligns.**

**Guidance:** Indicate the Foundation's area of focus which most closely aligns with your program/project.

- Education
- Healthcare
- Human Services
- Prison Reentry
- Other

If you selected Other, please describe.

---

**12. What is the total grant amount requested for this one-year grant period?**

**Guidance:** Indicate the amount you are requesting for the project or program you propose. It should be less than or equal to your total project or program budget.

---

**13. What type of funding are you requesting?**

- Advocacy/Infrastructure
- Bridge Grant
- Capacity Building
- Capital Fund Support
- Challenge Grant
- General Operating Support
- Matching Grant
- Program Support
- Technical Assistance
- Other

If you selected Other, please describe.

---

**14. What is your overall project or program budget?**

**Guidance:** Indicate the total, overall budget for this project or program. This should equal the dollar amount stated in the required project budget attachment.

---



**15. How much of the overall project or program budget amount, for this one-year grant period, have you already secured?**

**Guidance:** Indicate the dollar amount, out of the total project or program budget, that you already have committed from other sources, indicating if other funding sources are provided in-kind, cash or pledges. Do not include any grant dollars proposed to the Huey and Angelina Wilson Foundation in this grant proposal.

---

---

---

**16. How will this project be sustained in the long-term? What is the likelihood of achieving this sustainability over the next 24-36 months?**

**Guidance:** We are interested in understanding how you will sustain any ongoing costs, related to the project or program after the end of the grant period.

---

---

---

---

### Project Details

---

**17. What, specifically, is the issue that you want to address? Describe the challenge/need and seriousness of the issue.**

**250 words**

**Guidance:** Provide a brief description of what challenge exists in the community. If you were to take a snapshot of the participants or places **before** you interact with them, describe the barriers and/or challenges you expect the majority of them to face and would have to overcome to achieve success in the program or project. Please include data when appropriate and available.

---

---

---

---

---





**18. What is the population or place you propose to help through this project?**

**250 words**

**Guidance:** Please tell us with which group(s) of participants you will work and help us understand the level of difficulty you anticipate in helping them achieve success. Describe the persons, groups or places and the challenges they face that are not effectively addressed under current conditions or within existing systems. This may be a general group or a subset of persons whose specific risks or issues are not covered or served adequately by existing systems.

---

---

---

---

---

---

**19. Where will your project achieve results? Please select all that apply.**

**Guidance:** Please indicate all the parishes in the Greater Baton Rouge area where your project or program will achieve results. Please note Statewide means individuals throughout the state have an equal opportunity for impact, not simply those in other regions.

- Ascension
- East Baton Rouge
- East Feliciana
- Iberville
- Livingston
- Point Coupee
- St. Helena
- St. James
- West Baton Rouge
- West Feliciana
- Statewide





**22. Who will lead this project? What makes this person well-suited to lead? If that person is not yet on staff, what kind of talent/characteristics will you need in order to implement this project or program?**

**200 words**

**Guidance:** *Explain why the project leader is most qualified to achieve the results you seek. We are most interested in the characteristics this person possesses and why s/he are the right person to get your participants to achieve results. If the success of this project is dependent on a person's training or education, be sure to explain the relevance. The project lead may be staff rather than the executive director or CEO.*

---

---

---

---

---

**23. Who are the partners and collaborators critical to your success? What will they provide the project to help your participants achieve your results?**

**250 words**

**Guidance:** *Focus on those groups who have a role in your success and on their commitment to play that role. A partner or collaborator is a group or person whose behavior you do not control, but who must do something for you to succeed and/or to enter a setting.*

- *Describe how the organization will actually work with you on this project and what they have committed to provide to ensure your success.*
- *Demonstrate the strength of the relationship between the partners.*

---

---

---

---

---

**24. As far as you know, is this type of program or project currently offered in the community? If so, please list the organizations providing this service and how your program/project will provide additional value.**

**250 words**

**Guidance:** *Are there other providers serving this population with similar services? Explain how your programs differ and/or enhance one another's services.*

---

---

---

---

---



---

## *Required Attachments*

---

### **Attachments**

- Below you will find a list of the attachments that are **required** for your application to be considered complete.
- Please be sure to include the organization name on each individual attachment.

The following attachments are **required**:

- 1. Responsible Project Director(s)** - Names and qualifications of persons responsible for carrying out the program. Short biographies are acceptable. No resumes, please.
- 2. Budget Information** - Detailed project budget and budget narrative, including income sources and expenditures, as well as a list of other requests for funding, including those pending and/or approved.
- 3. Board List** - A list of organization's board members including the board members' principal occupations, a description of the term of office and the rotation schedule for the board.
- 4. Financial Statements** - 1) Last fiscal year's and 2) current year to date financial statements, including the organization's operating budget, balance sheet and statements of support, revenue and expenses. Year to date statements should be within the previous 2 months of submitting this grant. 3) Audit of most recent year.
- 5. IRS Determination Letter** - Stating that the organization or its fiscal agent is tax-exempt under section 501(c)3 of the Internal Revenue Code. Note: Fiscal agents must provide a separate letter stating its willingness to serve in that capacity.
- 6. Board Authorization Letter** - Statement from the organization's board of directors authorizing the request and agreeing to implement the project if funded.
- 7. IRS Form 990** - The most recently submitted Form 990.
- 8. Letter From Collaborators** - Letters from collaborators actively involved in this project.

*Optional Supporting Material* - May include current strategic plan, annual report, brochure or news article.