

# Non Profit Capacity Building

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## *Vermont Community Foundation*

### *Guidelines*

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The Vermont Community Foundation has grant funds available to support consulting services for nonprofits who need capacity building support. Grants will be no more than \$3,000. These grants are meant to supplement other funding, as we understand that this amount is typically not enough to cover the full cost of providing these services. In the application, we expect the budget to reflect the additional funding necessary to complete the project. We welcome the use of these funds as challenge grants to secure the additional funds.

The program will fund work that increases the effectiveness and sustainability of nonprofits through:

- Strategic planning initiatives to clarify mission, goals, and performance measures;
- Financial sustainability planning, including diversification of revenue streams, resulting in embedded fundraising/development skills, plans or techniques;
- Merger planning and implementation; and
- Diversity, equity and inclusion policy development and implementation.

We will prioritize funding requests that are tied to organizations and strategies focused on closing the opportunity gap. We prefer applications that identify a consultant. Full guidelines are available [on our website by clicking here](#).

#### **Helpful Hints:**

- Character limits include spaces.
- Be sure to save your work frequently by clicking the "Save" button at the bottom of the page as the system will log out after 90 minutes of inactivity.
- The size of text boxes can be adjusted by dragging on the lower right corner.
- Create a PDF version of your application via the "Application Packet" button at the top of the page. All content and attachments will be included.

All applications must be submitted electronically to the Vermont Community Foundation through the application form in the Online Grants Manager, which can be accessed at [www.vermontcf.org/OGM](http://www.vermontcf.org/OGM). Applications will not be accepted by mail or email. If you have questions about the Online Grants Manager, please contact [grants@vermontcf.org](mailto:grants@vermontcf.org) or 802-388-3355 ext. 222.

*Applications are accepted and reviewed on a rolling basis.*

## About Your Project

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### Project Name\*

*Character Limit: 100*

### Project Description\*

Provide a one sentence description of what the work will accomplish and how. Note: Your answer may be used in publications. *For example: "We will build our donor support base so that we may increase our enrichment programming for incarcerated youth."*

*Character Limit: 500*

### Amount Requested\*

Minimum \$500 / Maximum \$3,000

*Character Limit: 20*

### Geographic Area - Town/City\*

**What Vermont town(s) will be directly served by your project?**

Please keep your answer concise and refer to the following guidelines:

- For multiple towns, use commas to separate the town names.
- If your project spans state borders, limit your answer only to Vermont.
- If your project has broader implementation (multiple counties or statewide), you do not need to mention each town. Instead, briefly outline the geographic scope.

*Character Limit: 200*

### Geographic Area - County\*

Choose all that apply:

#### Choices

Statewide

Addison County

Bennington County

Caledonia County

Chittenden County

Essex County

Franklin County

Grand Isle County

Lamoille County

Orange County

Orleans County

Rutland County

Washington County  
Windham County  
Windsor County

### **Which of these three areas of work applies to your project?\***

Refer to the guidelines at the top of this form for more information. You must choose one.

#### **Choices**

Strategic Planning  
Merger Discussions  
Financial Sustainability Planning

#### **Goals\***

Explain the goal(s) of the project.

*Character Limit: 800*

#### **Activities\***

Describe the work that you will do.

*Character Limit: 800*

#### **Results\***

What are you hoping this project will accomplish and how will you measure your results? Please be specific.

*Character Limit: 800*

#### **Timeliness\***

Describe why this work is important at this time.

*Character Limit: 500*

#### **Timeline\***

Briefly state your project timeline. This grant cannot fund work that has already been completed prior to grant award notification. Ex. Summer 2017, Six months from grant award date.

*Character Limit: 250*

#### **Value to Vermont\***

Describe how the results of this work will be valuable to Vermont. Who or what will be better off in the State as a whole?

*Character Limit: 800*

#### **Consultant\***

This grant program funds only professional consultant costs to facilitate the work you describe. While not required at this time, please share the name of the consultant if you have chosen

one. Include their contact information and website if available. If you have not yet chosen a consultant please tell us how you plan to identify one.

*Character Limit: 300*

### Considering a merger? (If applicable)

Please explain the history and timeline of the conversations to date.

*Character Limit: 500*

### Bonus Words (Optional)

What else should we know about the project that we didn't ask?

*Character Limit: 900*

### Letter of Support (REQUIRED ATTACHMENT)\*

Please attach documentation of board support for the work you are proposing (not for the proposal itself). This can be either a letter from board chair(s) or copies of board minutes that reflect approval of the proposed effort. Please try to combine multiple files into one upload.

*File Size Limit: 5 MB*

### Project Budget - Itemized (REQUIRED ATTACHMENT)\*

Attach a copy of your itemized project budget. You should include both expenses and revenue, including pending and secured support. (Sample budget documents can be downloaded from the Community Foundation's website - visit our [Online Grants Center](#) for more details.)

*File Size Limit: 2 MB*

## Save and Submit

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***Applications are accepted and reviewed on a rolling basis.***

*By submitting your application to the Vermont Community Foundation, you give us permission to share your application with other potential funders, both individuals and foundations.*

## About Your Organization

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### Organizational Description\*

Briefly describe your organizations(s) or group(s) and its mission(s). (This is your "elevator speech" and may be used in publications.)

*Character Limit: 300*

## Closing the Opportunity Gap\*

How is your organization working to increase access to opportunity for Vermont youth and families and their communities? Please describe your current and/or anticipated outcomes, then select the best fit to the Community Foundation's strategic focus areas in the following question.

*Character Limit: 1000*

## Strategic Focus Area\*

Which strategic focus area(s) does your organization or project serve? **Read about our strategic focus areas by [clicking here](#).**

### Choices

Early care and learning  
 College and career training  
 Support for youth and families  
 Community and economic vitality  
 None of the above

## What status best describes the applicant?\*

### Choices

Municipal entity (i.e., town, public school, or other municipal department or agency)  
 Registered 501(c)(3) nonprofit  
 Church or religious group  
 Other - Please provide details in your answer to the next question.

## Use this space to provide additional information about the applicant's status. (If Applicable)

If you have a fiscal sponsor -- or if you operate under the umbrella of a larger registered nonprofit -- provide their name below.

*Character Limit: 200*

## Fiscal Sponsorship (If Applicable)

Our grants must be paid to a registered 501(c)(3) nonprofit, church/religious group, or town/municipal agency. If your organization or group does not fall into one of these categories, you will need to use a fiscal sponsor. Download a blank [Fiscal Sponsor Agreement form](#) and forward it to your fiscal sponsor to print, fill out, and sign. If you have questions, please contact Lauren at 802-388-3355 ext. 222.

Upload a scanned copy of your signed Fiscal Sponsor Agreement below.

*File Size Limit: 2 MB*

## Grant History\*

Has your organization received funding within the last two years from our Community Fund grant programs (Spark Connecting Community, Regional and Local Impact, and/or Special & Urgent Needs)? If Yes, please specify the project name(s) and grant year(s).

*Character Limit: 200*

The following financial documents are required to help the committee gain a clear picture of your organization's financial situation, budget, and need for this grant. In fairness to all applicants you must include these attachments. If you have questions or difficulty providing what we are asking for, please call 802-388-3355 ext. 222. (Sample documents can be downloaded from the Community Foundation's website - visit our [Online Grants Center FAQ](#) for more details.)

### **Profit and Loss - Completed Fiscal Year\***

Upload a copy of your organization's Profit and Loss statement from its most recently completed fiscal year.

*File Size Limit: 2 MB*

### **Balance Statement - Completed Fiscal Year\***

Upload a copy of your organization's Balance Statement from its most recently completed fiscal year.

*File Size Limit: 2 MB*

### **Budget to Actual - Current Fiscal Year\***

Upload a copy of your organization's current fiscal year budget as approved by your board of directors alongside your most recent profit and loss statement. You may need to combine multiple files into one.

*File Size Limit: 2 MB*

### **If you are showing a deficit in any of your financial documents, please tell us why.**

*Character Limit: 300*