

Equitable & Inclusive Communities (2024)

Vermont Community Foundation

Guidelines

The Vermont Community Foundation is seeking proposals from Vermont villages, towns, and cities that close the opportunity gap by supporting local efforts to foster inclusion and belonging for people of all races and backgrounds. We recognize the powerful leadership roles that local governments can play in removing structural barriers and building a more inclusive and diverse state, and want to support communities in fulfilling that potential.

This grant program, which was developed in cooperation with the Vermont League of Cities and Towns and Vermont's Office of Racial Equity, is intended to support communities participating in the IDEAL (Inclusion, Diversity, Equity, Action, and Leadership) Vermont program. A limited number of grants continue to be available for communities not participating in the IDEAL program.

Who May Apply

Eligible applicants are Vermont cities, towns, and villages. Nonprofit organizations or community groups doing work on behalf of and in coordination with a city, town, or village may apply if a letter of support from the municipal partner is included.

All applicants to programs at the Vermont Community Foundation must meet [these guidelines](#).

Grant Size and Term

This program will award grants of up to \$10,000 for an 18-month project period.

The Equitable & Inclusive Communities grant program accepts applications on a rolling basis. Participants in the state's IDEAL program must apply by August 15, 2024, to access grant dollars.

To learn more about this grant round please visit <https://vermontcf.org/inclusive>.

Helpful Hints

- Character limits include spaces and punctuation.
- 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. Applications will not be accepted by mail or email. If you have questions about the Online Grants Manager, please contact jmulcahy@vermontcf.org or 802-828-7760.

Organizational Questions Part I

Please share the mission of the organization.*

Character Limit: 500

Issues your organization works to address (words not sentences).*

Ex. homelessness, food insecurity, carbon emissions, forest fragmentation, childcare, substance misuse.

Character Limit: 500

What is your organization's annual operating budget?*

Character Limit: 20

Did you receive a grant from the Community Foundation in either 2022 or 2023?*

Choices

Yes

No

Unsure

Financial Statements - Completed Fiscal Year*

Please upload a copy of your organization's profit/loss statement and balance sheet from its most recently completed fiscal year. Sample documents can be downloaded from the Community Foundation's website - visit our Online Grants Center FAQ for more details.

File Size Limit: 3 MB

Financial Statements - Current Fiscal Year*

Upload a copy of your organization's budget to actual, including both revenue and expenses, from its current fiscal year. Sample documents can be downloaded from the Community Foundation's website - visit our Online Grants Center FAQ for more details.

File Size Limit: 3 MB

What status best describes the applicant?*

Our grants must be paid to a registered 501(c)(3) nonprofit, place of worship/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. If you have questions, please contact 802-388-3355 opt. 6. We are happy to talk through your options.

Choices

Municipal entity (i.e., town, public school, or other municipal department or agency)

Registered 501(c)(3) nonprofit

Place of worship 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 Sponsor Agreement Form (If Applicable)

Download a blank Fiscal Sponsor Agreement Form ([click here to download the form](#)) and forward it to your fiscal sponsor to print, fill out, and sign. The form must be filled out completely and you must use the official VCF form. Please call 802-388-3355 if you have questions.

Upload the form here.

File Size Limit: 3 MB

Which areas of the state does the organization serve?*

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 the following strategic focus area(s) aligns best with the work of your organization?*

Choose all that apply.

Choices

Economic Equity
Climate & Environment
Health & Wellbeing
Education & Training
Democracy, Trust, & Community Leadership

Other:

Character Limit: 500

Application Questions

Project Name*

Character Limit: 100

Total Amount Requested*

Character Limit: 20

Applicants may apply for up to \$10,000 for an 18-month project period.

Area Served*

What municipality or municipalities are served by this project?

Character Limit: 2500

About the Project*

Summarize your project and the activities or steps you will take to complete it. Include your timeline.

Character Limit: 2500

Outcomes*

What will be different because of this project? How will it serve the needs of the community's former, current, and future BIPOC residents and businesses?

Character Limit: 2500

Timeliness*

Why is the proposed approach the best one for your community at this time?

Character Limit: 1500

Community engagement in project development*

Who was involved in developing this project? How did you decide on this approach? *The strongest projects are those that have been developed in partnership with diverse groups of people, with varied lived experience.*

Character Limit: 2500

Previous work*

What work has your community undertaken so far on equity and inclusion? How will this project build upon that work? *If work is in the early stages, we are interested in knowing how the community made the decision to undertake equity work.*

Character Limit: 3000

Project Budget - Itemized*

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

File Size Limit: 3 MB

Project Budget - Additional Details (optional)

If this information is not provided elsewhere in the application materials, please provide a brief budget narrative for your proposed activities.

Character Limit: 2500

Evidence of Support*

Please upload a letter or other documentation from your select board or city council that demonstrates support for your proposed work.

File Size Limit: 3 MB

Organizational Questions Part II

Which of the following populations does your organization serve? Please check all that apply.*

Choices

- Children and youth
- Families
- Older Vermonters (age 65+)
- Small, rural communities
- Low-income or those living in poverty
- Black, Brown, or other People of Color
- Indigenous People
- LGBTQ+
- People with disabilities or special needs
- No special populations
- Unsure
- Other, describe:

Other:

Character Limit: 500

Approximately how many people do you serve on a regular basis during the course of a year?*

If your service level varies from year to year, you can use an estimate of the number you served in the last year.

Choices

- Fewer than 100
- 100-499
- 500-999
- 1,000-4,999
- 5,000-24,999
- 25,000-50,000
- More than 50,000
- Unsure

How many years has your organization existed?*

Choices

- Less than 5 years
- 5-10 years
- 11-20 years
- 21-50 years
- More than 50 years
- Unsure

How many paid full-time employees or the equivalent does your organization have?*

Choices

- no paid employees
- 1-2 full-time employees (or equivalent)
- 3-10 full-time employees (or equivalent)
- 11-20 full-time employees (or equivalent)
- 21-30 full-time employees (or equivalent)
- 31-50 full-time employees (or equivalent)
- 51-100 full-time employees (or equivalent)
- More than 100 full-time employees (or equivalent)
- Unsure

What are the demographics of your organization's leadership? Please check all that apply.*

Choices

- BIPOC led organization (Executive or Assistant Director, CEO, etc.)
- BIPOC members on the Board of Directors
- LGBTQ+ led organization (Executive or Assistant Director, CEO, etc.)
- LGBTQ+ members on the Board of Directors
- People with disabilities lead the organization (Executive or Assistant Director, CEO, etc.)
- People with disabilities are members of the Board of Directors
- None of the above
- Unknown or prefer not to say
- Other, describe:

Other:

Character Limit: 500

Save and Submit

The Equitable & Inclusive Communities grant program accepts applications on a rolling basis. Participants in the state’s IDEAL program must apply by August 15, 2024, to access grant dollars.

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