

2018 Spring Large Grants

Superior Health Foundation

Large Grant Application

Project Name*

Please enter the name of your project.

Character Limit: 250

Project Description*

Please provide a brief description of your project. You will have the opportunity to attach a detailed project description later in your application.

Character Limit: 10000

Organization Approval Date*

Please enter the date your project was approved by your governing organization.

Character Limit: 10

Board Representative's Name*

Please enter the name of a representative from your Board of Directors who has authorized the submission of this grant application.

Character Limit: 250

Grant Application Priority

If you are submitting more than one grant in this grant application deadline, please prioritize.

Character Limit: 250

Other Financial Support?*

Do you receive United Way / Other Financial Support for your Agency?

Choices

Yes

No

If yes, how much?

Character Limit: 20

Project Starting Date*

Character Limit: 10

Project Completion Date*

Character Limit: 10

Total Project Budget*

Please enter your total project budget. You will attach your detailed budget later in the application.

Character Limit: 20

Annual Agency Budget*

Character Limit: 20

Requested Amount*

Please enter the specific dollar amount you are requesting.

Character Limit: 20

Name of Fiscal Agent Organization (if applicable)

Character Limit: 250

Organization Description*

Briefly describe your organization, its history, purpose, current programs and services, the constituency served, geographic area(s) the organization serves.

Character Limit: 10000

Biographical Background*

Please provide a brief biographical background of the person who will conduct or supervise the proposed program.

Character Limit: 10000

Date your last audit/financial examination was performed*

Character Limit: 10

Outcome Evaluation Plan*

Please click [here](#) to download the Outcome Evaluation Plan document. Once you have completed this form, please attach it here.

File Size Limit: 1 MB

Upload concise, but specific, description of the project or activity proposed*

Include:

1. the specific purposes for which the grant is requested
2. the benefits to be provided
3. the needs to be met
4. the proposed measures of success/progress milestones
5. the constituency expected to benefit from the project
6. the geographic area(s) where the project or activity will take place, or location of the individuals who will benefit from the project or activity

7. a timetable for project completion

File Size Limit: 2 MB

U.P. Counties Impacted by Project*

Please indicate which U.P. counties will be impacted by this project.

Choices

- Alger
- Baraga
- Chippewa
- Delta
- Dickinson
- Gogebic
- Houghton
- Iron
- Keweenaw
- Luce
- Mackinac
- Marquette
- Menominee
- Ontonagon
- Schoolcraft

Upload detailed financial plan for the project*

Include:

1. a detailed budget listing sources of revenue, all direct costs, a breakdown of compensation by position if the application requests funds for staffing, and projected volume of services to be provided
2. the specific amount requested and the specific use being proposed
3. the amount raised to date
4. plans for procuring the remainder
5. other funding sources
6. a provision for contingencies and on-going support

File Size Limit: 2 MB

Board of Directors/Officers Roster*

Please attach a list of the names, offices in the organization, address, phone number, email address and business (if applicable).

File Size Limit: 1 MB

Upload Annual Report*

File Size Limit: 3 MB

Upload Financial Statements - Most Current Completed Fiscal Year*

Audited statements should be provided, if available, for the most current completed fiscal year, and a year-to-date unaudited financial statement for the current year. Organizations with less than two years of operating history should submit financial statements since inception and a two-year budget. Major sources of organizational support and endowments, if any, must be shown.

File Size Limit: 2 MB

Upload Financial Statements - Current Year-To-Date*

Audited statements should be provided, if available, for the most current completed fiscal year, and a year-to-date unaudited financial statement for the current year. Organizations with less than two years of operating history should submit financial statements since inception and a two-year budget. Major sources of organizational support and endowments, if any, must be shown.

File Size Limit: 2 MB

Upload Most Recent IRS Form 990*

File Size Limit: 4 MB

Upload IRS Determination Letter*

Qualified public charities must submit a copy of their most recent letter of determination from the Internal Revenue Service, a certification that tax exempt status has not changed and there are no facts or circumstances known that may result in a change of status. The letter should state:

1. that the organization is exempt from federal income tax under Section 501 (c) (3) of the Internal Revenue Code (or government entity)
2. that the organization is "not a private foundation" under Section 509 (a) of the Internal Revenue Code.

File Size Limit: 1 MB

Letter #1 of support from businesses, groups, or individuals who will donate or support the project*

Please provide two letters of support or other documentation from businesses, groups, or individuals who will donate to, or otherwise support, this project.

File Size Limit: 1 MB

Letter #2 of support from businesses, groups, or individuals who will donate or support the project*

Please provide two letters of support or other documentation from businesses, groups, or individuals who will donate to, or otherwise support, this project.

File Size Limit: 1 MB

Results of previous grant(s) received from SHF

If your organization has previously received funding from SHF, please state the results of your most recently completed previous grant. Also, please attach a letter of support from someone who benefited from the previous grant.

Character Limit: 10000 | File Size Limit: 1 MB

Additional Attachment (optional)

Please attach any additional documents you would like to include as part of your large grant application. This is optional.

File Size Limit: 2 MB

Additional Attachment (optional)

Please attach any additional documents you would like to include as part of your large grant application. This is optional.

File Size Limit: 1 MB

Additional Attachment (optional)

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File Size Limit: 1 MB

I hereby agree that the grant funds will be used solely for the purpose described. I also agree that a final report will be provided to the Superior Health Foundation describing the results of the project within one year of receiving grant funding. I understand that failure to submit a final report could result in denial of future grant requests.