Grassroots Leadership Fund Cohort 3

Rose Foundation

Hints For Applicants

- We highly encourage you to set up a conversation to discuss your eligibility before completing this application. Please email Aurora Heying, aheying@rosefdn.org or call 510-658-0702 x 2.

- We encourage you to use written material from other sources (your website, other grant proposals) when answering the application questions.

- Remember to save your application as you work! You will automatically be timed-out of the system after 90 minutes for security reasons. If any of your responses exceed the character limits or if any of your attachments are too big, your application will not be saved. Scroll down to the bottom of the page to find the "save as draft" button.

- To return to your application while in draft or after you submitted it, please go to http://www.rosefdn.org/onlineapplication.

- To download a PDF packet of this application, click on the PDF icon "Print Questions" at the top of this page.

- You do not need to use all the characters allowed in each question. Many successful proposals use far less than the character maximums for these questions. We provide more space than necessary.

- Spaces DO count as characters for the character count maximums.

- If you need additional space, you can continue your response in the "Optional Info/ Attachments" section.

- To make the response boxes larger, click and drag the lower right corner.

- You can now work with collaborators to fill out grant applications in our system! Use the "Collaborate" button in the upper right corner of the page to invite additional users to work on a proposal. However, collaborators may overwrite each other's work if they are working on the same question at the same time, so be sure to communicate about who is working on which question when. More instructions can be found here: https://support.foundant.com/hc/en-us/articles/4523887747223-Applicant-Tutorial-Collaboration

- This application system works best with Firefox. If you are having any technical problems, try using the Firefox browser. You can download it for free here.

- If you cannot use the online system to submit your application, **please email grants@rosefdn.org** and we will work with you to find an alternative solution.

General Information

Project Description*

In one or two sentences, please describe your work as if this was the only thing someone would read.

Character Limit: 800

Tax Status*
Which best describes your organization?

Choices
Incorporated as a 501(c)(3) nonprofit
Fiscally sponsored by 501(c)(3) nonprofit
Requesting fiscal sponsorship from the Fund

Issue Area - Environment*
Select up to three issue areas that best describe your group's focus:

Choices
Agriculture and food security
Air quality
Biocultural restoration / human-nature connection
Clean energy / energy efficiency
Climate change – just transition and resiliency
Green infrastructure and/or urban green space
Habitat / wilderness preservation
Land use and management
Public health
Toxics and hazardous waste
Water resources / watershed protection

Project Activities*
Select up to three project activities that this grant will fund:

Choices
Advocacy and policy
Community organizing and outreach
Data collection, monitoring, or research
Education
Infrastructure and equipment purchases
Internal capacity building
Litigation
Restoration and stewardship

State(s) Served*
Please select the state or states where you plan to do work with this funding.

Choices
Nationwide
Alabama
Alaska
Arizona
Arkansas
California
Colorado
Connecticut
Delaware
Florida
Georgia
Hawaii

Idaho
Illinois
Indiana
Iowa
Kansas
Kentucky
Louisiana
Maine
Maryland
Massachusetts
Michigan
Minnesota
Mississippi
Missouri
Montana
Nebraska
Nevada
New Hampshire
New Jersey
New Mexico
New York
North Carolina
North Dakota
Ohio
Oklahoma
Oregon
Pennsylvania
Rhode Island
South Carolina
South Dakota
Tennessee
Texas
Utah
Vermont
Virginia
Washington
Washington, D.C.
West Virginia
Wisconsin
Wyoming
Other

Fiscal Sponsor

If your organization has a fiscal sponsor, please provide the following information

Fiscal Sponsor Organization Name

Please provide the organizational name of your fiscal sponsor.

Character Limit: 100

First Name of Fiscal Sponsor Contact

Please provide the first name of the contact person for your fiscal sponsor.

Character Limit: 100

Last Name of Fiscal Sponsor Contact

Please provide the last name of the contact person for your fiscal sponsor.

Character Limit: 100

Email for Fiscal Sponsor

Please provide the email address of your contact person.

Character Limit: 100

Phone Number for Fiscal Sponsor

Please provide the phone number of your contact person.

Character Limit: 100

Street Address for Fiscal Sponsor

Character Limit: 100

City for Fiscal Sponsor

Character Limit: 100

State for Fiscal Sponsor

Character Limit: 2

Zip Code for Fiscal Sponsor

Character Limit: 100

Requesting Fiscal Sponsorship from Grassroots Leadership Fund

No 501(c)3 Tax Status

If your group is not currently a 501(c)3 organization or fiscally sponsored, what is your organization doing to move towards gaining c3 status or fiscal sponsorship?

Character Limit: 1500

Bank Account and EIN

If your group is **requesting fiscal sponsorship from the Grassroots Leadership Fund**, does the group have an EIN number and bank account in the name of the group?

Choices

Yes, we have an EIN number and bank account
We have an EIN number, but no bank account
We have a bank account, but no EIN number
We have neither an EIN number nor bank account
I don't know

Requesting Fiscal Sponsorship, No Bank Account

How does your group receive funding?

If your group is **requesting fiscal sponsorship from the Grassroots Leadership Fund**, and doesn't have a bank account, please explain how you receive funding.

Character Limit: 1000

Grant Request

Tell Us Who You Are*

Tell us about your group and please highlight any work related to climate-driven urban flooding and water systems that you are currently working on.
Please describe the communities that benefit from your work. What is the socio-economic, ethnic, and/or racial composition of these communities?

Character Limit: 6000

Organizational Capacity Building*

Describe your efforts to build your group's administrative systems and internal capacity over the past few years. This may include your board and volunteer pool, your accounting and communications systems, or your fundraising efforts. What do you see as your most immediate areas for growth? Where do you feel you could use the most support?

Character Limit: 4000

People

Number of paid employees: Full-time*

How many full-time paid employees do you have?

Character Limit: 200

Number of paid employees: Part-time*

How many part-time paid employees do you have?

Character Limit: 200

Volunteers*

Please estimate how many people volunteer for your organization during the year?

Character Limit: 3

Executive Director Demographics*

Does your organization's Executive Director identify as Black, Indigenous, or as a person of color (BIPOC)?

Choices

Yes
No
Co-EDs, at least one of whom identifies as BIPOC and at least one of whom does not
N/a - my organization does not have an ED

Board/Leadership Demographics*

Do 50% or more of your organization's Board members or non-board decision makers identify as Black, Indigenous, or persons of color?

Choices

Yes
No

Community Served Demographics*

Do Black, Indigenous, or people of color make up more than 50% of the community served by this project?

Choices

Yes
No
Unknown

Community Served Demographics Detail

If yes, do any of the following racial/ethnic groups make up the majority of the community served? (Select one)

Choices

Native American, Alaska Native, or Indigenous
Asian
Black/African descent

Latino/a/x/e or Hispanic
Middle Eastern or North African
Native Hawaiian/Pacific Islander
Multiple groups listed above
N/a

Communities Served

Which, if any, are the primary communities your work is designed to engage or impact? If this project is focused on the general population, please do not check any boxes.

Choices

Economically disadvantaged
Differently abled
LGBTQ+
Immigrants / refugees
Incarcerated / formally incarcerated
Non-English speakers / English limited speakers
Older adults
Rural communities
Unhoused individuals
Veterans
Women and girls
Youth

Financial Information

All of the following financial information should be for the applicant organization, not the fiscal sponsor.

Previous Year's Total Expenses*

How much did your organization spend in the previous year?

Character Limit: 20

Financial Statements*

Please attach a financial statement that shows the income and expenses for your group for the most recently completed year. This is a report that documents how much money you actually raised and spent in the previous year. You may use our financial statement template or attach your own. If you need help putting together your financial statement please take a look at our How-To sheet, here.

You may upload a Word, Excel or PDF document or cut and paste in the box below.

Character Limit: 5000 | File Size Limit: 20 MB

Optional Information/Attachments

Other Information/ Overflow Space (optional)

Is there any other information that would help us better understand your organization?
If you need additional space to answer any of the earlier questions you may use the box below.

Character Limit: 3000

Other Attachments or Media (Optional)

If you have a newsletter, publication, or letter of support to upload, you may do so here.

If you have any URLs or links you'd like to share, such as a Facebook page, website, video, or document that exists online, you may paste the links here.

Character Limit: 1500 | File Size Limit: 25 MB

Feedback

Time To Complete Application*

How long did it take to complete the application?

Choices

0-5 hours
6-10 hours
11-15 hours
16-20 hours
20+ hours

How Can We Improve?

How can we make this application simpler and more understandable?

Character Limit: 1000