



Grant Application Form

Grassroots Action Grants

Please read the application instructions before you begin. To complete the application, click in the blank white spaces and begin typing. Use the TAB key to move between fields. Please limit your responses to the space provided, and remember to save your work often. Email (grants@northstarfund.org), mail or deliver your completed application and required attachments to the North Star Fund office by 5 PM on the application deadline. **Your emailed application is not complete until you receive a confirmation of receipt email.**

A. ORGANIZATION BACKGROUND				
Organization Name				
Address		Zip Code		
Phone Number			Fax Number	
Website			Organization Email	
Contact Person (include title)				
Contact Phone Number			Contact Email	
Alternate Phone Number			Alternate Email	
Do you have 501(c)(3) status?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, list your EIN	
<i>Attach your 501(c)(3) letter from the IRS...OR...a letter from your fiscal sponsor and your fiscal sponsor's 501(c)(3) letter. (If you are not able to email these documents, please fax them to (212) 620-8178.)</i>				
If no, list your Fiscal Sponsor's name				
Fiscal Sponsor's Contact Person and Address		Fiscal Sponsor's EIN		
Fiscal Sponsor Phone			Fiscal Sponsor Email	
How did you learn about our grants program?	<input type="checkbox"/> North Star website <input type="checkbox"/> Foundation Center <input type="checkbox"/> Colleague <input type="checkbox"/> Other* * If other, please specify: _____			
Have you applied for funding from North Star in the past?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, indicate last month and year that you applied:	
List the key issues that your organization is addressing.				
1)				
2)				
3)				
Where do you conduct the majority of your work?				
<input type="checkbox"/> Citywide <input type="checkbox"/> Borough (specify: _____) <input type="checkbox"/> Neighborhood (specify: _____)				
Check the levels at which your work is making an impact:				
<input type="checkbox"/> Citywide	<input type="checkbox"/> Statewide	<input type="checkbox"/> Regional	<input type="checkbox"/> National	<input type="checkbox"/> International

B. BUDGET INFORMATION (CURRENT AND PREVIOUS FISCAL YEARS)

PLEASE SUBMIT YOUR BUDGET BELOW, DO NOT USE A SEPARATE FORM

EXPENSES	Most Recently Completed Year	Current or Projected Year
Salaries/Wages	\$	\$
Benefits/Taxes	\$	\$
Consultants/Stipends	\$	\$
Rent/Utilities	\$	\$
Office Supplies	\$	\$
Telephone	\$	\$
Postage/Mailing	\$	\$
Printing/Copying	\$	\$
Equipment	\$	\$
Travel/Transportation	\$	\$
Meetings/Conferences	\$	\$
Other, please specify		
1.	\$	\$
2.	\$	\$
Total Expenses	\$	\$
REVENUE		
	Most Recently Completed Year	Current or Projected Year
Foundation Grants	\$	\$
Corporate Donations	\$	\$
Individual Donations	\$	\$
Government Grants/Contracts	\$	\$
Membership Dues	\$	\$
In-kind Contributions	\$	\$
Fees for service	\$	\$
Other, please specify:		
1.	\$	\$
2.	\$	\$
Total Income	\$	\$

List your paid staff positions (Names, Titles & Salaries) below. If you plan to add staff, please list Titles and Salaries:

- 1.
- 2.
- 3.
- 4.
- 5.

List key volunteer positions below:

- 1.
- 2.
- 3.
- 4.
- 5.

List your confirmed foundation grants and award amounts for the current fiscal year below.

- 1.
- 2.
- 3.
- 4.
- 5.

List your pending foundation grants and awards for the current fiscal year and their amounts below.

- 1.
- 2.
- 3.
- 4.
- 5.

C. ORGANIZATIONAL COMPOSITION

Leadership: List the number of board, staff, or key volunteers for each demographic below and the number of members. ****Please use numbers, not percentages. Please note that numbers do not have to add up to the total****

	People of color	Low-income	Youth	Seniors	Immigrant	Disabled	LGBT	Women		Total
Board										
Staff/core volunteers										
				Total Number of Members/People in your base: <i>Please do not leave blank.</i>						
				Total Number of Active Members/People who are actively involved on a day-to-day basis in your work: <i>Please do not leave blank.</i>						

Constituents: Indicate the percentage breakdown of the constituents served by your organization. ****Please use percentages, not numbers here. Please note that percentages do not have to add up to 100% ****

	People of color	Low-income	Youth	Seniors	Immigrant	Disabled	LGBT	Women		
Constituents/ People in your base	%	%	%	%	%	%	%	%		
Race/ Ethnicity of Membership	___ % Arab			___ % Jewish			___ % South Asian			
	___ % Asian/Pacific Islander			___ % Latino/a			___ % White			
	___ % Black			___ % Mixed Race			___ % Other, specify ___			
	___ % Caribbean			___ % Native American						

D. PROPOSAL NARRATIVE

Your proposal narrative must be no more than 3 pages; additional pages will not be reviewed. Fill in the blank spaces provided using Microsoft Word (approximate word counts are supplied) or attach a separate, typed, three-page narrative answering the following questions.

1. Briefly describe your organization’s mission, social justice vision and major accomplishments.
Approximately 100 words.

2. Describe the most pressing issues or problems that the community your organization serves is facing. Please include statistics if you have them. Approximately 100 words.

3. North Star Fund prioritizes projects in which those most impacted by an issue are in leadership positions. Who is your constituency and how are they involved in leadership? Approximately 100 words.

4. What are your goals for the next year? (What are you trying to accomplish, both within your organization and in New York?) Please be specific and include measurable outcomes (e.g. number of members recruited, number of leaders developed, specific institutional change – whatever is appropriate for your work). Approximately 100 words.

5. What will be your implementation strategies and activities in the next year? (What do you plan to do during the grant period?) You may include a timeline of projected activities. Approximately 300 words.

6. How will you know if you are successful in meeting your goals? (How do you evaluate your work?)
Approximately 100 words.

7. How do you ensure the long-term sustainability of your organization and your work? (Describe your fundraising plan.) Approximately 100 words.

8. How does your organization define diversity? How does your group address issues of race, age, class, gender, sexual orientation, and disability? How do you carry out these values within your organization? Approximately 100 words.

9. If you were to receive a site visit, what days of the week and times of the day would your members and leaders be most available to meet with our Community Funding Committee?

10. In what language do your staff and members feel most comfortable talking about the organization's work?