



**2008 FINAL GRANT APPLICATION INSTRUCTIONS FOR REQUESTS IN EXCESS OF \$5,000**  
***(To be submitted by invitation only.)***

The Jewish Women's Foundation of Metropolitan Detroit (JWF) thanks you for participating in the Letter of Intent portion of its 2008 Grant Cycle and for your dedication and hard work on behalf of women and girls in your Jewish Community.

The Final Grant Application, **due no later than 12:00 pm (noon) on Wednesday, April 16, 2008**, is your opportunity to expand upon the information that you have already provided to the JWF in your Letter of Intent. It is permissible to use portions of your Letter of Intent.

The following items are required as part of your Final Grant Application. Please use this as your checklist and include it with your application:

A Final Grant Application Cover Page\*, signed by your organization's (or your fiscal agent's) Chief Professional Employee/Executive Director and Chief Lay Leader/Board President

A list of your organization's current Board of Directors

A Program/Project Narrative, as described on the following page

A Final Grant Application Program/Project Budget Form\*

A Final Grant Application Program/Project Demographics Form\*

Your organization's current annual operating budget listing both income and expenses

Your organization's most recent annual Financial Statement (audited if available)

Letters of acknowledgement from organizations that are partners or collaborators in the program/project

Optional: One or two letters of support

**Do not** complete this application unless you have completed the Letter of Intent phase of your request and have been invited to submit a 2008 Final Grant Application.

**Do not** attach any materials not specifically requested (e.g., no flyers, brochures, video tapes, DVD's, tickets, etc.)

\*Please note that we are including copies of the Final Grant Application Cover Page, Budget Form and Demographics Form.

**Completed Final Grant Applications are due in the JWF office no later than 12:00 pm (noon) on Wednesday, April 16, 2008. You may hand deliver, mail, email or fax them. If you email or fax, please be sure to indicate the number of pages included in the fax or email, and please mail an original of the signed Final Grant Application Cover Page.**

Please email or call Helen Katz, Director, [katz@jfmnd.org](mailto:katz@jfmnd.org) or 248.203-1483, if you have questions about completing your Final Grant Application.

### **Program/Project Narrative Instructions:**

You may not need to use the entire page allotment, but do not exceed the page limits. Please type and double-space the requested information and related answers using a size 11 font or larger, number your pages and use the headings and numbers provided below.

- 1. Organization Information** – not to exceed one page
  - a. Please provide a one-paragraph history of the organization.
  - b. Please describe your organization’s mission, goals, service population and service activities.
  - c. Please describe any programming your organization has previously provided that was designed to benefit Jewish women and girls.
- 2. Description of Program/Project and Purpose of Grant** – not to exceed four pages
  - a. Describe the program/project
  - b. State the need that the program/project is designed to address and how it will address that need.
  - c. How did you determine that the need exists?
  - d. Describe the target population.
  - e. Describe and explain how the program/project promotes social change.
  - f. If there is an advocacy component in the program/project, please describe it.
  - g. Is this a new or existing program/project?
  - h. Provide a timetable for the implementation of the program/project. (All projects must begin and be substantially in progress during the grant period of July, 2008 through September, 2009.)
  - i. Identify partners or collaborating organizations and their roles.
    - i. If a partner’s contribution to the program/project will be of a financial nature, please indicate whether that commitment is considered secured or pending at this time and include it on the Final Grant Application Program/Project Budget Form.
    - ii. If the commitment is contingent upon an occurrence, please describe the nature of the particular contingency.
    - iii. If a partner’s contribution to the program/project is In-Kind, please describe what the partner will be doing, estimate the monetary value of those In-Kind contributions and include that amount in “expenses” and “revenue” on the Budget Form.
  - j. Describe your staffing needs for the program/project.
  - k. If you receive funding for the period of time covered by the 2008 Grant Cycle, how will you sustain the program/project beyond the 2008 grant period (see 2, h above), and what are your plans for securing continuation funding?
- 3. Evaluation** – not to exceed one page
  - a. Describe your plans for evaluating the outcomes of the program/project, including how success will be defined and measured.
  - b. Describe how the evaluation results will be used and/or disseminated.
  - c. Describe the active involvement of constituents in evaluating the program/project.
- 4. Budget Narrative** – not to exceed one page

Please explain how you calculated the program/project expenses and revenue. Also, please provide explanations or any additional information that will be helpful in understanding your budget. If you have included In-Kind support in “revenue” on the Budget Form, then please be sure you have also included the corresponding amounts in your “expenses” on the Budget Form.



**2008 FINAL GRANT APPLICATION COVER PAGE**

*(To be submitted by invitation only.)*

You may scan, reproduce, photocopy or download this page from [www.jewishdetroit.org/jwf](http://www.jewishdetroit.org/jwf)

Please note that this Cover Page is almost identical to that submitted with your Letter of Intent, and you may copy information directly from that form. However, **this separate Cover Page is required** to provide us with updated Final Grant Application information and to obtain authorization from your organization's (or your fiscal agent's) Chief Professional Employee/Executive Director and Chief Lay Leader/Board President.

Organization Name: \_\_\_\_\_

Program/Project Name: \_\_\_\_\_

Is this a new or existing program/project?: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ email address: \_\_\_\_\_

Organization Address: \_\_\_\_\_

Organization Founding Year: \_\_\_\_\_

Percent of women on organization's Board of Directors: \_\_\_\_\_%

Percent of women on organization's staff: \_\_\_\_\_% on the program/project staff: \_\_\_\_\_%

Total program/project budget: \$ \_\_\_\_\_

Amount requested from JWF: \$ \_\_\_\_\_

Past JWF grants requested or received, year/amount: \_\_\_\_\_

Please list on a separate page if necessary or check here if not applicable: \_\_\_\_\_

Total organizational annual budget: \$ \_\_\_\_\_

Chief Professional Employee / Executive Director: \_\_\_\_\_

Signature: \_\_\_\_\_ Print or Type Name and Title  
Date: \_\_\_\_\_

Chief Lay Leader / Board President: \_\_\_\_\_

Signature: \_\_\_\_\_ Print or Type Name  
Date: \_\_\_\_\_

Brief, one paragraph description of the program/project for which you are seeking JWF funding:



## 2008 FINAL GRANT APPLICATION

### PROGRAM/PROJECT DEMOGRAPHICS FORM

*(To be submitted by invitation only.)*

You may scan, reproduce, photocopy or download this form from [www.jewishdetroit.org/jwf](http://www.jewishdetroit.org/jwf)

Name of Organization: \_\_\_\_\_

Name of Program/Project: \_\_\_\_\_

Estimated number of Jewish women and/or girls the project will serve: \_\_\_\_\_

The total number of Jewish women and/or girls served can be broken down into the following age categories:

\_\_\_\_\_ Girls ages 0 - 12

\_\_\_\_\_ Adolescent Girls ages 13 – 18

\_\_\_\_\_ Young Women ages 19 – 25

\_\_\_\_\_ Adult Women ages 26 - 45

\_\_\_\_\_ Adult Women ages 46 - 69

\_\_\_\_\_ Elderly Women ages 70+

\_\_\_\_\_ Mixed Ages - Women and Girls

Estimated number of other people served by the project:

\_\_\_\_\_ Non-Jewish Women and/or Girls \_\_\_\_\_ Men and/or Boys

Estimated total number of people to be served by the project: \_\_\_\_\_

Comments on other demographics (e.g. low income, impaired population, etc.) regarding people served by the project:



**2008 FINAL GRANT APPLICATION  
PROGRAM/PROJECT BUDGET FORM**

**for requests in excess of \$5,000**

*(To be submitted by invitation only.)*

The purpose of this Budget Form is to provide the JWF with complete information about your Program/Project's projected Expenses and Revenues. You may scan, reproduce, photocopy, or download this form from [www.jewishdetroit.org/jwf](http://www.jewishdetroit.org/jwf). Below is a listing of standard Budget items, please add categories where necessary.

**Please also indicate the time period that this Budget covers:** \_\_\_\_\_ **to** \_\_\_\_\_

**I. PROGRAM/PROJECT EXPENSES**

	<b><u>A. Total Expenses</u></b>	<b><u>B. Amount Requested</u></b>
Salaries	_____	_____
Payroll Taxes	_____	_____
Fringe Benefits	_____	_____
Consultants and Professional Fees	_____	_____
Insurance	_____	_____
Travel	_____	_____
Equipment	_____	_____
Supplies	_____	_____
Printing and Copying	_____	_____
Telephone and Fax	_____	_____
Postage and Delivery	_____	_____
Rent	_____	_____
Utilities	_____	_____
Maintenance	_____	_____
Evaluation	_____	_____
Marketing	_____	_____
Other (Specify)	_____	_____
<b>TOTAL EXPENSES</b>	_____	_____*

**II. SOURCES OF REVENUE**

	<b><u>C. Committed Revenue</u></b>	<b><u>D. Pending Revenue</u></b>	<b><u>E. (C plus D) Total Revenue</u></b>
Grants/Contracts/Contributions			
Government**	_____	_____	
Foundations**	_____	_____	
Corporations**	_____	_____	
Individuals	_____	_____	
Earned Income (Admissions, Fees, etc.)	_____	_____	
In-Kind Support (Indicate Source)**	_____	_____	
Other Revenue (Specify)	_____	_____	
<b>TOTAL REVENUE</b>	_____	_____	_____

**III. PROGRAM/PROJECT FUNDS NEEDED**

**Total Expenses in excess of Committed Revenue (A minus C)** \_\_\_\_\_

**Total Expenses in excess of Total Revenue (A minus E)** \_\_\_\_\_

**IV. AMOUNT REQUESTED FROM JWF (Max. \$20,000)** Must equal Total from column B \_\_\_\_\_\*

\*\* Please itemize Sources of Revenue from Government, Foundations and Corporations in your budget narrative. Be sure to include the value of In-Kind Support in both Expenses and Revenue on this form and explain in your budget narrative.