**THE JOYCE FOUNDATION ONLINE FORMAL PROPOSAL**

#### Please note the following when copying and pasting your proposal information to the portal:

#### The portal does not autosave. Click the “SAVE” button as you work to ensure your data will not be lost.

* **Do not use your browser’s back key,** as you will lose any unsaved data.
* All information collected through the Grantee Portal will be accessible by the Joyce Foundation, including information saved in the draft status.

#### If you would like to download the application and complete your proposal in Microsoft Word before submitting it online, download form [here](http://www.joycefdn.org/assets/images/Grant_Standard_App.pdf).

#### To include hyperlinks in your application, please copy and paste them from Microsoft Word.

#### Responses are required for all questions that appear in bold.

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| **Organization**  |  |

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| **Location**  |  |

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| **Primary Contact** |  |

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| **Primary Signatory** | (Select the primary contact name for this application. To add a new contact, please have them register at www.joycefdn/fluxx.io.) |

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| **Financial Contact**  |  |

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| **Communications Contact**  |  |

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| Tax ID (EIN) |  |

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| **Mission Statement:** (*maximum 3,000 characters*) |
| (If there is an update, go to the organization’s menu to complete a “Changes Requested” form.) |

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| **Describe the organization, including background, purpose, objectives, and experience in the areas for which funds are requested:** (*maximum 3,000 characters*) |
| (If there is an update, go to the organization’s menu to complete a “Changes Requested” form.) |

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| **Is the applicant organization providing fiscal sponsorship for this project?**[If “Yes” the question below will appear.]Please provide the following details of the entity that will execute the proposed work. | **Yes/No**  |
| * Name of the entity
* Name of project lead(s) from this entity
* Job title of project lead(s)
* Email of project lead(s)
* Phone of project lead(s)
* Information regarding project lead(s) involvement
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| **Current Fiscal Year-End** | Date Field  |

 **Please enter the financial data below for the current fiscal year.**

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| **Total Organizational Budget** |  | **Total Revenue** |  | **Total Operating Expense** |  |

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| **Are there any Joyce Foundation staff or board members involved with this organization or project?** [If “Yes” question below will appear] | Yes/No |

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| Please provide the name(s) and a brief description of their involvement.  |
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| References: Please provide the name(s) of up to five external contact(s) who can serve as a reference for your organization and/or the project for which funding is sought.  |
| (Include full name, affiliated organization, job title, and email) |

**Project Overview**

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| **Project Title** (*maximum 300 characters*) |
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| **Request Amount** |  |

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| **Project Budget** |  |

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| **Duration in Months**  | (months) |

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| **Start Date** | mm/dd/yy |

**PROGRAM AREA**

Please select any of the applicable program areas and focus areas specific to request for funding. Review the Joyce Foundation [guidelines](http://www.joycefdn.org/apply/what-we-fund) and choose the best possible fit.

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| **Program Area** | * Menu with Program Area options will appear
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|  **Focus Area** | * Specific options will appear based on Program Area selection
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Issues of equity are core to the Joyce Foundation’s historical mission of promoting quality of life, safe and healthy communities, and a just society. We focus [on advancing racial equity and economic mobility for the next generation](http://www.joycefdn.org/apply/what-we-fund) in the Great Lakes region.

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| **If applicable, please select any of the following strategic themes that align with your request.**  | **Investing in the Next Generation** – Improve outcomes for the next generation, defined as young people born after 1997.**Racial Equity** – Achieve more equitable outcomes for diverse populations. Incorporate the voice of people in the communities impacted by the issues you address.**Economic Mobility** – Improve the ability of individuals to move up the economic ladder within a lifetime or from one generation to the next.**Not Applicable**[If “Investing in the Next Generation, Racial Equity or Economic Mobility” is selected the question below will appear:] For information regarding strategic themes and our program areas please click [here](http://www.joycefdn.org/apply/what-we-fund).* Describe how request aligns to the strategic themes of [Investing in the Next Generation, Racial Equity, and/or Economic Mobility](http://www.joycefdn.org/news/investing-in-the-future-of-the-great-lakes-region-an-update)? (maximum 1500 characters)
 |

**Has your organization submitted demographic information to** [GuideStar](http://www.guidestar.com)**? Yes/No/Unknown**

*This data can be used to spark conversation, reflection, and action about how best to ensure that organizations reflect, and are responsive to, everyone in our society.*

**GEOGRAPHICAL AREA SERVED**

Click on the “+” icon to the right to select the applicable state(s), cities and neighborhood (if applicable) specific to the request for funding. Also, provide an estimated percentage by geography, by clicking on the pie chart icon.

Please note:

* Every applicant is required to identify a geography served in North America, and to select either United States or Canada or at least one state or province and neighborhood (if applicable).
* Select multiple states if applicable.
* If the request will directly serve specific cities or neighborhood, please provide information to that level.
* A search function is available. Type the state or city in the “Search” field to quickly identify the location(s). Double-check to make sure the location shown is accurate before making your final selection.
* After selecting the states and cities, click on the pie chart icon to add the estimated percentage of the requested grant that would be spent in that geographical area.

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| **Geographical Area Served** | Search Menu will be available for multi-selection and require estimated percentages. |

**This question requires an answer with estimated percentages. Click on the pie chart icon above your selection(s). Estimates are acceptable.**

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| **Does your project target specific ethnic populations? If yes, please provide an estimate by percentage.** | Asian/Asian American \_\_\_ %Black/African American \_\_\_ %Hispanic/Latinx \_\_\_ %Native American/Alaska Native/Native Hawaiian \_\_\_ %White \_\_\_ %Multi-racial or multi-ethnic \_\_\_ %Other \_\_\_ % |

 **This question requires an answer with estimated percentages (if applicable). Estimates are acceptable. However, if you would like to use the latest US Census information, specific geography statistics can be found** [**here**](https://www.census.gov/quickfacts/fact/table/US/PST045217#qf-headnote-a)**.**

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| **Does your project target specific age groups?  If yes, please provide an estimate by percentage.** | Ages 0-04 \_\_\_ %Ages 05-13 \_\_\_ %Ages 14-17 \_\_\_ %Ages 18-24 \_\_\_ %Ages 25-64 \_\_\_ %Ages 65 + \_\_\_ %All ages \_\_\_ % |

**This question requires an answer with estimated percentages (if applicable).** **Estimates are acceptable.**

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| **Year 1 amount requested from Joyce** |  |
| Year 2 amount requested from Joyce |  |
| Year 3 amount requested from Joyce |  |
| **Total Amount Requested:** | Auto Calculate |

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| **Provide committed funding sources and amounts that will support the project (if none, type N/A).** *(maximum 1,000 characters)* |
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| **Provide pending funding sources and amounts that will support the project (if none, type N/A).** *(maximum 1,000 characters)* |
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**Project Narrative**

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| **Provide an executive summary of the proposed project.** (*maximum 4,000 characters*) |
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| **Describe the project’s goals. In addition, if you are applying to renew a grant, please describe the progress on your prior grant with a summary of the outcomes and/or impact of the prior grant to date.** (*maximum 4,000 characters*) |
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| **Describe the targeted audience(s). *(****maximum 1,000 characters)* |
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| **Describe the project’s deliverables.** *(maximum 1,000 characters)* |
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| **Describe the timeline and plans for implementation.** (*maximum 6,000 characters*) |
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| **Describe the plans for evaluation.** (*maximum 3,000 characters*) |
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| How will you share project results or make them public? (Optional, only provide if applicable) (*maximum 3,000 characters*) |
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| **Progress Indicators (THIS WILL BE AVAILABLE WHEN ONLINE APPLICATION IS IMPLEMENTED)**Please review the following progress indicators and provide responses to each in the box below. (The codes in brackets are for internal tagging purposes only, please disregard): (*maximum 6,000 characters*)  |
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**Attachments**

#### Please note the following when providing the following attachments:

* Documents listed in bold are required.
* Documents are uploaded by using the Document Upload box below.
* Click on the “+” icon to upload your document, click on “Add files” then select the appropriate document.
* Click “Start upload” to begin, when the upload is complete, the status should be 100%.
* Click on the “X” at the upper right-hand corner of window to close.
1. **Itemized project budget and narrative (if relevant), amount of funds requested from Joyce, the proposed uses, and the time period over which funds will be expended**
2. **Names and qualifications of people involved in the project**
3. **List of board members, including title, outside affiliation, and telephone number**
4. **Organizational expenses and income for the previous, current, and upcoming fiscal year**
5. **Audited financial statements for the most recently completed fiscal year**
6. **Internal Revenue Service Form 990 plus attachments for the most recently completed fiscal year**
7. Internal Revenue Service verification that the organization is a 501(c)(3) tax-exempt organization and qualifies as a public charity as defined in IRS Code section 509 (a)(1), (2), or (3). A copy of the IRS tax-exempt determination letter if this is NOT already uploaded to the grantee portal.
8. Additional requested information by Joyce staff (if applicable)
9. Additional proposal information related to narrative (if applicable)
10. Fiscal Sponsor Agreement that describes the budgetary, legal, programmatic and administrative responsibility for the project. (if applicable)

Should you have any questions or feedback regarding the progress of the application, please email info@joycefdn.org or call (312)782-2464.