

# Sudden and Urgent Needs

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*Charlottesville Area Community Foundation*

## *Grant Request Information*

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### **Project Name\***

Name of Project.

*Character Limit: 100*

### **Requested Amount\***

Maximum award amount is \$10,000.

*Character Limit: 20*

### **Primary use of funds\***

Please categorize your request based on the primary use of funds.

#### **Choices**

- General Operations
- Capacity Building
- Pilot/New Program
- Existing/Ongoing Program
- Facility Improvements

### **Project Sector\***

If you are seeking funding for a specific project/program, please select the description that most closely aligns with that project/program. This might be the same as your organization as a whole or it might be different.

#### **Choices**

- Aging & Seniors
- Animal Welfare/Wildlife
- Arts & Culture
- Child/Youth Development
- Civic Engagement
- Education
- Environment & Sustainability
- Essential Needs (food, shelter, clothing)
- History, Historic Preservation, or Genealogy
- Mental Health and Substance Abuse
- Physical Health and Wellness
- Transportation
- Workforce and Economic Development

### Geographic Location\*

Please select the locale you are primarily serving with the work described in this application. You can select multiple items.

#### Choices

- Albemarle County
- Buckingham County
- City of Charlottesville
- Fluvanna County
- Greene County
- Louisa County
- Nelson County
- Orange County

### Project-specific demographics served\*

Please briefly describe the demographics of the population that you are primarily engaging in the work described in this application.

*Character Limit: 300*

### Organization Demographics\*

Is your group/organization/project Black and/or ALAANA-led? (ALAANA stands for African, Latine/o/a, Asian, Arab, and/or Native American.) Please select all that apply.

#### Choices

- Executive Director(s) or equivalent
- Majority Staff
- Majority Volunteer (if volunteer-led organization)
- Majority Board members
- Majority of project team
- None of the above

### Rural Serving\*

Is your group/organization/project located in and/or primarily serving a rural community? Rural areas are considered any area in our region outside the City of Charlottesville and the urban ring of Albemarle County.

#### Choices

- Yes
- No

### Organization History\*

How long has your group/organization/project been in operation?

#### Choices

- 0-5 years
- 6-10 years
- 11+ years

**Staff Size\***

How many paid staff do you have?

**Choices**

- All volunteer
- 0.5 - 6 staff
- 7 - 20 staff
- 21+ staff

**Annual Operating Budget Size\***

Roughly what will your annual expenses be this year?

**Choices**

- less than \$50k
- \$50k - \$249k
- \$250 - \$499k
- \$500 - \$999k
- \$1-2M

**First Time Applicant?\***

Is this your group/organization/project's first time applying for funding from the Charlottesville Area Community Foundation?

**Choices**

- Yes
- No
- Uncertain

**Contact person for this grant - first name\***

*Character Limit: 250*

**Contact person for this grant - last name\***

*Character Limit: 250*

**Contact person for this grant - telephone number\***

###-###-####

*Character Limit: 250*

**Contact person for this grant - email\***

*Character Limit: 254*

**Fiscal Sponsorship\***

Is your organization fiscally sponsored? Fiscally sponsored organizations do not have EIN/tax IDs.

**Choices**

- Yes
- No

## *Fiscal Sponsor Information*

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Please list your fiscal sponsor's information below.

### **Fiscal Sponsor Organization Name\***

*Character Limit: 250*

### **Fiscal Sponsor EIN/Tax ID\***

*Character Limit: 250*

### **Fiscal Sponsor mailing address\***

Street

*Character Limit: 250*

### **Fiscal Sponsor mailing address\***

City

*Character Limit: 250*

### **Fiscal Sponsor mailing address\***

State (please use two letter code)

*Character Limit: 2*

### **Fiscal Sponsor mailing address\***

Zip Code

*Character Limit: 250*

## *Application Preferences*

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### **Sharing Permissions**

The Community Foundation shares application submissions with its fundholder community. This is optional and with the permission of the organization only. By checking below, you agree to the following:

"I give permission for the Community Foundation staff to share this application with donors who might be interested in supporting the work outlined in this proposal"

### **Choices**

Yes, the Community Foundation staff may share this application with donors

## Application Method\*

The foundation will accept a previous grant application or video in lieu of the SUN Grant application listed below. As a reminder, any documentation must answer all of the same questions listed on the SUN Grant Guidelines (including the budget) and will be reviewed by the same rubric. Would you like to submit a previous grant application or alternative application material?

### Choices

Yes

No

## Alternative Application Materials

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### Brief Application Summary\*

**Please summarize your funding request in 2-3 clear and concise sentences.**

Note: This summary will be used by the Foundation staff and the Review Committee to conduct the initial review of your proposal. This summary may also be used to share funding requests with our fundholders.

Example: "Funding request of \$10,000 to support the Paradigm Explosion program. The program will enhance the educational and extracurricular offerings for rural high school students. The aim of the program is to level the playing field for students in rural high schools."

*Character Limit: 300*

Please use this space to include a previous grant application or alternative application material.

We will accept another grant application or a video that answers the questions in the SUN grant application. A video submission should be a link to Vimeo or YouTube. Select one of those links for tutorials on video submissions. If you need support to complete the application, please contact us at [grants@cacfonline.org](mailto:grants@cacfonline.org).

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*Character Limit: 5000 | File Size Limit: 3 MB*

### Budget\*

Please upload a budget that accurately reflects the use of funds that you are requesting.

*File Size Limit: 1 MB*

### Budget

Share an optional Budget Narrative.

*Character Limit: 500*

## *SUN Application Questions*

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### **Brief Application Summary\***

**Please summarize your funding request in 2-3 clear and concise sentences.**

Note: This summary will be used by the Foundation staff and the Review Committee to conduct the initial review of your proposal. This summary may also be used to share funding requests with our fundholders.

Example: "Funding request of \$10,000 to support the Paradigm Explosion program. The program will enhance the educational and extracurricular offerings for rural high school students. The aim of the program is to level the playing field for students in rural high schools."

*Character Limit: 300*

### **Background\***

Tell us about your group/organization/project's work and history and how it reflects the purpose of this grant program, OR share a document/website with this information.

*Character Limit: 5000 | File Size Limit: 3 MB*

### **Scope of Work\***

What are the underlying causes of the issue/inequity being addressed, what is your vision of success, and how will you accomplish your goal(s)?

*Character Limit: 5000*

### **Leaders & Partners\***

Describe your group/organization/project's leadership and staff. Explain the key role that your people have played in your team's success. Emphasize the skills, capacity, knowledge, lived experience, and/or partnerships your team possess that have made your organization, and your relationship with the community, successful and adaptable.

*Character Limit: 5000*

### **Leaders & Partners, continued\***

Please describe how you are engaging those most impacted by your work as partners/co-creators. If possible, cite an example of a time you changed course based on this community engagement.

*Character Limit: 5000*

### **Budget\***

Please upload a budget that accurately reflects the use of funds that you are requesting.

*File Size Limit: 1 MB*

### **Budget**

Share an optional Budget Narrative.

*Character Limit: 5000*

## Additional Information

Is there anything else you would like to share with us about your application or the application process?

*Character Limit: 5000*

## Uploads

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### Optional Additional Supporting Documentation

Use this space to attach any supporting documents (letters of support, 1-pagers, brochure, photos, or anything else that tells the story).

*File Size Limit: 3 MB*

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