

The PB & J Fund 2024

Charlottesville Area Community Foundation

Eligibility Question

Grant Criteria*

The mission of The PB&J Fund grant program is to support programs within the community that:

- empower children and/ or families through culinary and nutritional education; AND
- help improve access to affordable, healthful food for under-resourced community members.

Does your grant application meet both of these criteria?

Choices

Yes

No

Organization Information

Project Name*

Name of Project.

Character Limit: 100

Requested Amount*

Awards will be either one-time, unrestricted awards of up to \$25,000 to be used over the period of one year, OR multi-year, unrestricted awards of up to \$50,000 to be used over the period of two years.

Character Limit: 20

Grant Award time period*

As noted above, awards will be either one-time, unrestricted awards of up to \$25,000 to be used over the period of one year, OR multi-year, unrestricted awards of up to \$50,000 to be used over the period of two years.

Choices

One year

Two year

Primary use of funds*

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

Choices

- General Operations - unrestricted funding for the overall organization
- Capacity Building - funding to increase the organization's operations
- Pilot/New Program - funding specifically for newly created program
- Existing/Ongoing Program - funding for a continuous, specific program

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
- Arts and Culture
- Child/Youth Development
- Civic Engagement
- Education
- Environment and 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

Project-specific geography*

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

Choices

- City of Charlottesville
- Albemarle County
- More than one above
- We also serve outlying counties in addition to one or both of the above

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 Leadership*

Is the organization primarily engaging and/or led by people of color? Please select all that apply.

Choices

- Serving (majority of people served)

Led by (Executive Director [or equivalent] is a person of color)
Governed-by (majority of Board are people of color)
None of the above

Organization History*

How long has your organization been in operation?

Choices

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

Staff Size*

Choices

- All volunteer
- 0.5 - 6 Full-Time Equivalent Positions
- 7 – 20 Full-Time Equivalent Positions
- 21+ Full-Time Equivalent Positions

Annual operating budget size*

Roughly what will your annual expenses be this year?

Choices

- less than \$50k
- \$50k – \$249k
- \$250k – \$499k
- \$500k – \$999k
- \$1 million or more

First Time Applicant?*

Is this your first time applying for a grant at CACF?

Choices

- Yes
- No
- Uncertain

Contact Information for this grant*

First Name

Character Limit: 250

Contact Information for this grant*

Last Name

Character Limit: 250

Contact Information for this grant*

Phone number

Contact Information for this grant*

Character Limit: 254

Fiscal Sponsorship*

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

Choices

Yes

No

Site Visit

Applicants requesting funding over a two year period will be contacted for a site visit.

Site Visit Contact Information*

First Name

Character Limit: 250

Site Visit Contact Information*

Last Name

Character Limit: 250

Site Visit Contact Information*

Phone Number

Character Limit: 250

Site Visit Contact Information*

Email Address

Character Limit: 254

Fiscal Sponsorship

Please list your fiscal sponsor's information below.

Fiscal Sponsor Organization Name*

Character Limit: 250

Fiscal Sponsor Tax ID/EIN*

Fiscal Sponsor Mailing Address*

Street

Character Limit: 250

Fiscal Sponsor Mailing Address*

City

Character Limit: 250

Fiscal Sponsor Mailing Address*

State

Character Limit: 250

Fiscal Sponsor Mailing Address*

Zip Code

Character Limit: 250

Returning Applicant

Returning Applicant*

Did you receive this grant in the past calendar year?

Choices

Yes

No

Unknown

Grant Impact

Grant Impact*

If you received funding from the PB&J Fund grant program in the past calendar year, please describe how funds were used and the impact of the funding support.

Character Limit: 1000

Issues & Actions

The mission of The PB&J Fund grant program is to support programs within the community that:

- empower children and/ or families through culinary and nutritional education; AND
- help improve access to affordable, healthful food for under-resourced community members.

The Fund envisions moving our local and global community towards food sovereignty.

The PB&J Fund values:

- Respect: appreciating the differences and assets of all people, communities, and culture
- Learning: fostering an enjoyment of eating healthfully
- Caring: Ensuring a seat at our table where bellies are filled with nutritious and delicious food
- Collaboration: Improving our community's resources through partnership

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

Identification of the issue(s)*

Within the above mission scope, what current trends, needs, or challenges are you seeing in the community that your program/organization will address?

Please use local data and/or observations to illustrate.

There are many ways to gather evidence and data takes many forms such as: stories, statistics, surveys, focus groups, journal entries, debriefing sessions, case studies, logs, registries, interviews, etc.

Character Limit: 2000

Use of Funds*

How will you use these grant funds to address the problem or support the work you described?

Please include a brief budget narrative if seeking funding for a specific program.

Tip: Think about describing the "who, what, when, where, and how" of your actions.

Character Limit: 2000

Total Project Budget (if applicable)

Character Limit: 20

Total Organization Budget*

What are your anticipated current fiscal year total organizational expenses?

Character Limit: 20

Project/fund use start date*

Character Limit: 10

Note: The Community Foundation will not fund projects that are already completed nor reimburse expenses that have already been incurred.

Engagement, Evaluation, & Assets

We are interested in understanding the rationale behind your work. These questions will ask specific details about the activities funded by this grant and how your work connects to the community impact you hope to see.

COMMUNITY ENGAGEMENT*

Please describe how you are engaging the people most impacted by your program/organization as partners or co-creators in the work. Can you cite an example of a time you changed course based on this community engagement?

Community engagement can range from survey and focus group feedback to community members acting as co-creators and strategists in the design of a project. We look to see those most impacted by the work engaged as closely as possible. It is one thing to collect information. It is something else to change course based on an analysis of what has been collected and what the community says it needs.

Character Limit: 2000

IMPACT*

What would success and/or progress look like over the next 12 months? How will you measure, evaluate, and then refine your work?

What specific, quantifiable benchmarks do you hope to reach and what indicators will let you know that you have reached them? What kind of long-term changes do you expect to see if this work continues? Will your work impact the broader community?

Character Limit: 2000

CAPACITY & PARTNERS*

Please describe why your organization is particularly well-positioned to do this work and carry out these goals at this time. Also describe any partners and their role in helping to achieve these goals.

Consider feasibility factors such as: time, costs, organizational capacity, ethics, your relationship and reputation with the population you will engage, any groundwork that has already been laid, etc

Character Limit: 2000

Financial Position

Ongoing Expenses*

If you will incur expenses beyond the scope of this grant (ex. a staff salary) for this program, what are your plans to meet those ongoing needs?

Please note any identified funding sources or opportunities you plan to pursue as well as any already-committed revenue streams.

Character Limit: 1500

Additional Budget Narrative

Is there anything in your budget attachments that you would like to explain further to the review committee(s)?

Character Limit: 1500

Matching*

If awarded, will this grant be counted towards an existing match from another funding source?

Choices

Yes

No

Uncertain

Additional Application Narrative

Is there anything else you would like the Community Foundation to know in order to better understand your work and your proposal?

Character Limit: 1500

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.

Uploads

Project Budget

Budget for Requested Funding (only for applications seeking support for a specific program)

File Size Limit: 5 MB

Additional Supporting Documentation

Additional Supporting Documentation (like letters of support, brochure, 1-pager, photos, or anything else that tells the story).

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