

Twice is Nice Grant 2024

Charlottesville Area Community Foundation

Criteria

The Twice is Nice fund awards to local nonprofit agencies who provide services to local seniors in need.

Guidelines*

Does the primary aim of your proposed program benefit local seniors in need?

Choices

Yes

No

Application Overview

Project Name*

Name of Project.

Character Limit: 100

Request Amount - Lower Limit*

The Community Foundation understands that each organization has unique funding needs. To ensure we can best support your work with the foundation's limited resources, please provide a funding range that aligns with the work of your organization. Please consider factors such as project scope, duration, anticipated outcomes, and funds from other sources when determining this range.

Character Limit: 20

Request Amount - Upper Limit*

Maximum award amount is \$15,000.

Character Limit: 20

Geography Served*

Which locale(s) will be primarily served by this work? Select all that apply

Choices

Albemarle County

City of Charlottesville

Fluvanna County

Greene County

Louisa County

Nelson County

Fiscal sponsorship*

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

Choices

- Yes
- No

Type of Funding*

Please select the type of funding you are requesting

Choices

- General Operations
- Programmatic

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

Returning Applicant

Returning Applicant*

Did you receive this grant in the past calendar year?

Choices

- Yes
- No

Grant Impact

Grant Impact*

If you received funding from the Twice is Nice grant program in the past calendar year, please describe how these funds were used and the impact of the funding support.

Character Limit: 1000

Fiscal Sponsorship

Please use the space below to include information about your fiscal sponsor.

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*

Zip Code

Character Limit: 250

Fiscal Sponsor Mailing Address*

State

Character Limit: 250

Fiscal Sponsorship Letter*

Please upload a letter from your Fiscal Sponsor officially confirming your relationship

Funding Support

Is this a new or existing program?*

Choices

New

Existing

Program/Project Budget*

What is the total budget for this program?

Character Limit: 20

Program/Project Start Date*

Please note: We are not able to fund projects that have already been completed or cover expenses that have already been incurred. Award notifications are expected to be announced by November 29, 2024.

Character Limit: 10

Program/Project End Date*

Character Limit: 10

Funding Request Narrative

Project Narrative*

Please describe the project in 2-3 sentences. There is a 500 character limit.

Character Limit: 500

Project Impact*

Please quantify the impact of the funding request. How many seniors in need would this program serve? This could be an estimated number of seniors, or reflected as a percentage of your total programming.

Character Limit: 1000

Definition*

How do you define a "senior in need"?

Character Limit: 1000

Community Trends*

What current community trends/needs will your work address and how have you identified these trends/needs?

Character Limit: 1000

Organizational Capacity*

Please describe your organization's experience implementing the proposed program (personnel, programmatic approach and resources to conduct funded activities). Please include strengths and perspectives that your organization is bringing to this work.

Character Limit: 1500

Outcomes and Evaluation*

Please identify anticipated outcomes and describe how you will your results be evaluated.

Character Limit: 1500

Additional Information

Partnerships

Please list any project-specific partnerships and the role that each partner may play.

Character Limit: 750

Additional Support

Please identify any gift-in-kind or volunteer hours that will go into this work but may not be captured in a budget or balance sheet:

Character Limit: 250

Would a Twice is Nice Grant award be counted towards a match?

Choices

Yes

No

I'm not sure

Total organizational annual budget from current fiscal year*

Total organizational annual budget from previous fiscal year*

Program Budget

If your application is requesting support for a specific program, please include a project budget.

File Size Limit: 20 MB

Letters of Support

Feel free to share any letters of support from community members, partner organizations or others involved with your organization as relates to this grant application.

File Size Limit: 25 MB

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 may share this application with donors