Capacity Building & Systems Change Grants 2017

Application

Project Name*
Name of Project
Character Limit: 100

Project Type*
Please choose the type of project you are applying.
Choices
Capacity Building
Systems Change

Accelerator Initiative*
Apply to be an Accelerator organization?
Choices
Yes
No

Accelerator Type
Please select the type of Accelerator organization you are applying (if applicable).
Choices
Established Organization
Emerging Organization

Project Description*
Provide a brief description of your project that summarizes what you intend to do, how you will do it, when you will begin and end the project, and what you intend to achieve at the conclusion of the project.
Character Limit: 3000

Video Application*
Please upload your video or add a link to your video. Your video application may be up to seven minutes in length and must briefly describe your organization. In addition, your video application should more fully describe your project, how you believe it fits with the chosen focus area, how it is centered in racial equity, what will be different as a result, and how youth will benefit from this result. Please remember that your video application will be screened through a youth led review process. This process will determine which applications are recommended to the Youthprise board for funding.
Video Link
Character Limit: 100

Project Start and End Date*
Projects are limited to twelve months and must end by 12-31-18, however, projects may begin as early as 10-1-17.
Character Limit: 75

Geographic Area*
What is the geographic area served by your project?
Choices
Saint Paul
Minneapolis
Greater Minnesota
Twin Cities Metropolitan Area
Suburban Twin Cities

Target Population*
Who is your target population?
Character Limit: 300

Remember to save your work using the Save As Draft button at the bottom of the page.

Total Project Budget*
What is the total cost of your project?
Character Limit: 20

Amount Requested*
Amount Requested from Youthprise?
Character Limit: 20

Project Budget*
Please upload a budget that describes how Youthprise funds will be spent.
File Size Limit: 3 MB

Evaluation*
Please describe your indicators of success and how you intend to measure them.
Character Limit: 3000

Grant Number
Grant Number
Organizational Information

Year Founded*
Character Limit: 4

Organizational History & Mission*
Briefly describe the history of your organization, mission, and organizational goals.
Character Limit: 2000

Total Organizational Budget for Current Year*
Character Limit: 20

Financial Statements*
Please upload your most recent audited financial statements or IRS 990 form. If you do not have these forms, upload an explanation why. If you need to add clarifying information regarding your financial statements, please upload that information as well.
File Size Limit: 8 MB

ADA Compliance*
Do the policies and practices of your organization comply with the Americans with Disabilities Act?
Choices
Yes
No

Anti-Terrorism Compliance*
Does your organization agree that it will not promote, support, or engage in terrorism of any kind, nor will it sub contract with any entity or individual that engages in these activities?
Choices
Yes
No

Racial & Ethnic Diversity*
Youthprise is interested in organizations that have a commitment to diversity, equity, and inclusion. In our review process, we will consider how the racial and ethnic composition of an organization’s staff and board is reflective of program participants.
Please describe the following:
1. The number of all staff, the number of staff that represent racial and ethnic groups, and the breakdown of all staff by race and ethnicity.
2. The number of all board members, the number of board members that represent racial and ethnic groups, and the breakdown of all board members by race and ethnicity.

3. The number of staff assigned to this project, the number of staff assigned to this project that represent racial and ethnic groups, and the breakdown of project staff by race and ethnicity.

4. A list of key staff, their titles, and the racial and ethnic groups they represent.

Character Limit: 5000

**Racial Equity and Inclusion Policy**
Does your organization have a Racial Equity and Inclusion Policy?

**Choices**
Yes
No

Remember to save your work using the *Save As Draft* button at the bottom of the page.

**Authorization**
Please type the name and title of the person who has the authority to submit this application to Youthprise. Typing the name and title below constitutes an electronic signature.

**Name**
*Character Limit: 150*

**Title**
*Character Limit: 150*

**Is your organization a 501(c)(3) nonprofit?**

**Choices**
Yes
No

**Is your organization a public agency or unit of government?**

**Choices**
Yes
No

**Is your organization using a fiscal agent?**

**Choices**
Yes
No
A fiscal agent is required if the applicant is not a nonprofit or a unit of government. Please provide the following information (if applicable):

**Fiscal Agent Employer Identification Number:**
*Character Limit: 150*

**Fiscal Agent Contact**
- Last Name
- First Name
- Title
- Organization
- Contact Email
- Contact Phone
- Address
- City
- State
- Zip
- County
*Character Limit: 300*

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