

The Heinz Endowments Grant Application without EIN Check

Organization Information

Organization Information		
Organization Name		
Legal Name <i>This is your legal name that the IRS has on file, populated by the Tax ID you provided at the beginning of this form.</i>		
Also Known As <i>Please add any abbreviations, nicknames or acronyms. (separated by commas)</i>		
Tax ID		
Mailing/Street Address		
City	State <Select One>	Zip Code
Organization Main Phone <i>Please use the following format (###) ###-####</i>	Organization Main Fax <i>Please use the following format (###) ###-####</i>	
Organization E-mail Address <i>i.e. info@heinz.org (generic email address for the organization), if applicable</i>		
Website		

Additional Organization Information	
Organization Budget <i>What was your organization's total annual budget in the last completed fiscal year?</i>	
Number of Full Time Employees	
Audit Completed Flag <None>	Date Fiscal Year End <i>Please provide the fiscal year end date of the most recent audit available.</i>

Mission

What is the mission of your organization?

Major Successes

Please describe the history and major successes of your organization.

(These need not relate directly to the project or work proposed in this application.)

major successes

Past Funding

No

Past Funding History

If yes, briefly describe

Non-Profit Performance Evaluation

The Heinz Endowments believes that strong nonprofit organizations demonstrate strong human resources practices. These questions will help us understand how our grantees experience these issues.

1. Does staff, including the Executive Director, receive fair pay and benefits based on objective criteria?

<None>

Comments

2. Does the board of the organization evaluate the Executive Director's performance annually to provide meaningful feedback, support and development?

<None>

Comments

3. Could this organization afford to pay market-level wages to fill vacancies with equally competent people?

<None>

Comments

4. Does the organization ensure that it recruits from a diverse pool of candidates?

<None>

Comments

Contact Information

Head of the Organization (i.e. CEO, President or Executive Director)

Prefix First Name Middle Name Last Name Suffix
<Select One>

Title

E-mail

Office Phone Extension
Please use the following format (###) ###-####

Office Fax Mobile Phone
Please use the following format (###) ###-#### *Please use the following format (###) ###-####*

Mailing/Street Address

City State Zip
<Select One>

Primary Contact for this grant request.

Same as Head of Organization listed above

No

Prefix First Name Middle Name Last Name Suffix
<Select One>

Title

E-mail

Office Phone
Please use the following format (###) ###-####

Extension

Office Fax
Please use the following format (###) ###-####

Mobile Phone
Please use the following format (###) ###-####

Mailing/Street Address

City State Zip Code
<Select One>

Project Information

Project Title

Purpose of Grant (one sentence summary-this is a 255 character field)

Project Description

Please provide an overview of this project

Facilities

Please describe the facilities, or space, in which this proposed work will take place.

Over what period of time will this funding be used?

Project Start Date

Project End Date

Project Budget

What is the total cost of the project

Request Amount

What amount of funding are you requesting from The Heinz Endowments?

Please select the type of support you are seeking.

You may select up to 4 types, indicating the percentage of support for each selection. All selections must add up to 100%.

Funding Partners

Please list any other funding partners.

Staff

If applicable, indicate The Heinz Endowments' staff person this should be brought to the attention of.

Goals and Measures

Endowments' Strategic Area Goals and Strategies

Which of the Endowments' [Strategic Area Goals and Strategies](#) is related to this proposal? Please select from drop-down below

Connection to The Heinz Endowments' Goal

How does this project connect to the goal you selected above?

Past Performance

If this request is for an existing or similar project/program, please provide highlights of past performance of the project/program.

Briefly describe up to four project/program goals. For each goal please be specific about how you will know that you have achieved your desired outcomes. If your request is for more than one year of support, please include specific measures of success for each year of your project/program.

Goal 1

Example: *A goal for the early literacy program was to increase the number of children able to read at grade level when they entered third grade.*

Goal 1 Measure(s) of Success

Example: *A measure of success for the after-school program was the reduction in participants' school suspensions from 10 to 3.*

Goal 2

Goal 2 Measure(s) of Success

Goal 3

Goal 3 Measure(s) of Success

Goal 4

Goal 4 Measure(s) of Success

Proposal Attachments

Please upload the following documents to complete your application. To upload a document, click the Browse button, locate the document on your computer, click Open, then click Upload.

Project Budget

Project Budget

Please attach a complete project/program budget with income and expenses. Indicate expenses to be covered by this request

Board of Directors

Board of Directors

Most recent list of board of directors and officers.

Patriot Act

Signed Patriot Act

A current year, signed patriot act statement on your corporate letterhead, signed by the head of the organization. [Click here for example](#)

Most Recent Audit

Most Recent Audit

Your most recent audited financial statement.

Additional Information

1. Additional Information

Any additional information/attachments

2. Additional Information

Any additional information/attachments

3. Additional Information

Any additional information/attachments