

**ROCHESTER AREA COMMON APPLICATION FORM
INFORMATION FOR GRANTSEEKERS**

Before using the Common Application Form (CAF) to apply for a grant, consult the list below to determine if the funder to whom you are applying accepts the form. Please check the Grantmakers section of the current *Guide to Grantmakers in the Rochester Area: (Guide)* to see if your project or program matches the interest of the funder(s) you wish to contact. Follow procedures for each funder as described below and in The Guide.

The CAF can be downloaded in rich text format at no charge from the Grantmakers Forum of New York website, www.grantmakers.org. A diskette with the CAF can be purchased from the Grantmakers Forum of New York for \$8. (Mail a check payable to the Grantmakers Forum of New York, 919 Winton Rd. South, Rochester NY 14618.)

The funders listed below have agreed to accept the Common Application Form with the following requirements.

- Unless otherwise noted, funders require all sections of the CAF to be completed.
- If a dollar amount is listed with the funder's name, all sections must be completed for requests of that amount or higher.
- For funding requests less than the stated amount, applicants may use the **short form** (omit items 3 and 4, the logic model and rationale).
- Additional Instruction Notes:
 - (a) Requires additional information – see *Guide* listing or contact funder
 - (b) Requires letter of inquiry before applying
 - (c) Call before applying

Examples:

ABC Foundation, \$5,000, (c): Omit items 3 and 4 for requests below \$5,000; Call before applying

XYZ Corporation, \$1,000, (a, b): Omit items 3 and 4 for requests below \$1,000. Send letter of inquiry before applying. Requires additional information

The Smith Trust (b): Requires complete CAF for all proposals. Send letter of inquiry before applying.

The Rochester Area Common Application Form (CAF) was developed in 1999 by the Rochester Grantmakers Forum (RGF) and the Rochester Effectiveness Partnership (an evaluation program of RGF) to facilitate the application process for both grantmakers and grantseekers, and to focus on results. Grantmakers and grantseekers worked together to create it.

ORGANIZATIONS THAT WILL ACCEPT THE ROCHESTER AREA COMMON APPLICATION FORM
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Advertising Council of Rochester (a, c; *use short form for consultant, full form for community impact requests*)

ALSTOM Signaling Foundation, \$5,000

American Wildlife Research Foundation

Ames-Amzalak Memorial Trust, \$1000

Bausch and Lomb, \$5,000

Birds Eye Foods Foundation (Agrilink Foods/Pro-Fac Foundation) (*use short form for all requests*)

Caldwell Manufacturing Company, \$5,000

Chase Pitkin Home and Garden, see Wegmans

Citibank, \$10,000

Cornyn Foundation, \$1,000

Delphi Automotive Systems, \$1,000

Eastman Kodak Company, \$10,000 (a)

Everett Charitable Trust, \$10,000

Foundation for the Jewish Community, \$10,000

Goldberg Berbeco Foundation (a; *use short form for projects with total budget under \$10,000, full form for all others*)

Golisano Foundation, \$2,500 (a)

HSBC Bank USA – Rochester Region

Halcyon Hill Foundation, \$5,000 (b)

HealthNow NY, (*use short form for event underwriting under \$1,000, full form for all other requests*)

Daisy Marquis Jones Foundation, \$6,000 (b)

KeyBank of New York, \$10,000

Suzanne Lee Charitable Trust

Oliver B. Merlyn Foundation

Mary S. Mulligan Charitable Trust, \$5,000

RCIPA Community Health and Educ. Fdn., \$1,000

Rochester Area Community Foundation

Rochester Female Charitable Society

Rochester Primary Care Network (*for pre-selected applicants only*)

Kilian J. & Caroline F. Schmitt Foundation (*short form*)

Time Warner Communications, \$1,000

Wegmans Food Markets, \$1,000

Fred & Floy Willmott Foundation, \$2,500 (*proposal should be 1-sided and not bound or stapled*)

M.C. and J.C. Wilson Foundation, \$6,000 (b)

Unity Health Foundation, \$1000 (b)

Women's Foundation of the Genesee Valley

Wyman-Potter Foundation (*use short form for all*

requests; additional information may be requested)

Xerox Corporation, \$2,500

APPLICATION CONTENT

Please note: A. Applications should be legible. Handwritten in black ink, word processed or typed.
B. "Organization" = group whose 501(c)(3) status is being used.

A complete application will include items 1-10. Some funders will accept a "short form" omitting items 3 and 4. Please refer to the Information for Grantseekers cover sheet for additional information.

1. **Executive Summary** (This will take the place of a cover letter.) Please create in bulleted rather than narrative form. To save you time, we suggest that you wait until after completing the rest of the proposal to develop this section. We encourage you to limit this to one page or less. It should be a brief synopsis of your request, able to serve as a stand-alone piece.
 - A. Organization name
 - B.
 1. Project/activity name
 2. One sentence summary of project/activity
 - C. For this request, summarize:
 1. Why (community need)
 2. Who and how many (target population, including age, gender, ethnicity, other relevant characteristics)
 3. What (services provided)
 4. When (timeframe)
 5. Where (location of the work)
 - D. What do you hope to accomplish (outcomes)?
 - E. How does this request meet this funder's priorities?
 - F. State the total cost of this effort, and the amount requested from this funder.
 - G. Signatures of CEO and a board representative, preferably the board chair or president.
2. **Information sheet** (use attached form).
3. **Logic model** (use attached form and instructions).
4. **Rationale** (follow attached instructions).
5. **Program or Project Budget sheet** (use attached form).
6. **Financial summary of your organization's most recently completed fiscal year**, including the original budget and actual revenue and expenses for that year.
7. If you are a 501(c)(3) organization, a copy of the **IRS determination letter** advising that your organization is exempt from taxes under Section 501(c)(3) of the IRS code, and that the organization is not a private foundation as defined in Section 509(a).
8. Listing of organization's **Board of Directors** with their affiliations.
9. **Most recent audited financial statement and accompanying management letter** for a complete fiscal year of the organization. If your financial statements have never been audited, indicate why – e.g. you are too small, or your organization is too new.
10. **Annual report**, if available, or a brief description of the scope of your organization's work.

2. INFORMATION SHEET

GRANT APPLICATION TO (name of funder):

Organization Information

<p>Name & address of applicant organization:</p> <p>Telephone Number:</p> <p>Fax Number:</p> <p>E-mail:</p> <p>Chief Executive Name and Title:</p> <p>9-digit Federal Employer ID #:</p> <p>Year organization incorporated:</p>	<p>Is the name at the left the same as it appears on the IRS 501(c)(3) Letter of Determination? <input type="checkbox"/>yes <input type="checkbox"/>no If not, explain:</p> <p>For current fiscal year: Organization's total budgeted revenue: Organization's total budgeted expenses:</p> <p>Fiscal year: _____ to _____</p> <p>Revenue Sources:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border-right: 1px solid black; padding-right: 5px;"> <input type="checkbox"/> % government (city, county, state, federal) <input type="checkbox"/> % United Way <input type="checkbox"/> % membership </td> <td style="width: 50%; padding-left: 5px;"> <input type="checkbox"/> % fees <input type="checkbox"/> % grants <input type="checkbox"/> % investment income <input type="checkbox"/> % fund raising (e.g. events, gifts, bequests, etc.) </td> </tr> </table>	<input type="checkbox"/> % government (city, county, state, federal) <input type="checkbox"/> % United Way <input type="checkbox"/> % membership	<input type="checkbox"/> % fees <input type="checkbox"/> % grants <input type="checkbox"/> % investment income <input type="checkbox"/> % fund raising (e.g. events, gifts, bequests, etc.)
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Information for This Request

<p>Name of this program or project:</p> <p>Program/project contact person: Name:</p> <p>Phone #:</p> <p>Total cost of this effort:</p> <p>Amount requested from this funder:</p> <p>Type:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Capital <input type="checkbox"/> Construction <input type="checkbox"/> Renovation <input type="checkbox"/> Equipment <input type="checkbox"/> Endowment <input type="checkbox"/> Program/Project <input type="checkbox"/> General Support <input type="checkbox"/> Other (describe) <p>Date funds needed by:</p> <p>Date by which funds will be spent:</p>	<p>List other potential and actual sources of support - put an "*" by those committed, noting any matching fund requirements.</p> <table style="width: 100%; border: none;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;"><u>Amount</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Funder</u></th> </tr> </thead> <tbody> <tr> <td style="height: 100px;"> </td> <td> </td> </tr> </tbody> </table> <p>List major funders of program/project for past two years if applicable:</p> <table style="width: 100%; border: none;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;"><u>Amount</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Funder</u></th> </tr> </thead> <tbody> <tr> <td style="height: 100px;"> </td> <td> </td> </tr> </tbody> </table>	<u>Amount</u>	<u>Funder</u>			<u>Amount</u>	<u>Funder</u>		
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3. ROCHESTER AREA LOGIC MODEL

(See attached Logic Model Section for guidelines and sample logic models.)

Program/Project _____ Agency _____ Date _____

Program/Project Time frame: _____

Program/Project Goal: _____

Names & titles of those with key roles in developing logic model:

Inputs (<i>\$'s, staff, volunteers, materials & other resources required</i>) Quantify inputs wherever possible (e.g. "2.5 FTE social workers," "270 volunteer hours")	Activities (<i>What the program does with the inputs to achieve its outcomes</i>) Activities should be quantified (e.g. 2 support groups/10 moms ea./2 hrs/wk for 4 mos.)	Projected Outcomes (<i>Effects on knowledge, attitudes, skills, behavior, condition or status during or after the program/project</i>)	
		Shorter-term Outcomes put a "*" next to those you will measure	Longer-term Outcomes put a "*" next to those you will measure

(Add additional pages if needed.)

4. RATIONALE

(Please include the following. We strongly encourage you to limit the total length of the rationale to 4 pages or less.)

- A. **Need/demand** (present in bulleted format, and where possible, include local statistics, community priorities, etc)
1. Summarize the need for your planned work.
 2. Summarize customer demand for this work.

B. Outcomes

For each outcome you will track, as identified in your logic model, indicate how you will know if you succeed in achieving it, using the following format.

Outcomes	Indicators/Measures (What will you measure to know if you reach your outcomes?)	Targets/Performance Standards/Projected levels of success/What will tell you that you have achieved your outcomes?	By when will targets be achieved?

- C. **Activities** (use bullets or a chart where possible)
 Why do you believe the activities listed in your logic model reduce or eliminate the need described in item A on this page?

- D. **Organizational capacity** to undertake project
1. What is your organization’s mission, and how does this project relate to it?
 2. Summarize similar program accomplishments in the past, including the extent to which your outcomes were reached (use bullets or a chart where possible).

E. Links with other agencies

1. If this is a collaborative effort, complete the following:

Collaborating organizations	Contact person	Phone number	Role(s) of partners

2. Do you know of other groups doing similar or related work? If so, how does your work differ from or complement theirs?

- F. What is the **future of this program or project** beyond the grant period?
1. In terms of programming, summarize what is envisioned.
 2. If it is to continue beyond the grant period, how will you support this project?

G. In no more than ½ page, say anything else you want to about this request.

5. PROGRAM OR PROJECT BUDGET SHEET

A. Provide the following information regarding the program or project for which you seek funds.

SUPPORT/REVENUE

	Total Anticipated Support/Revenue
1. Requested grant	
2. Fundraising events	
3. Gifts/bequests	
4. Miscellaneous contributions	
5. Foundation/corporate grant support	
6. United Way	
7. Grants/contracts: govt. agencies	
8. Program service fees	
9. Membership dues	
10. Investment income/transactions	
11. Sales: services, products, crafts	
12. Miscellaneous revenue	
13. Subtotal Direct Support/Revenue	
14. Proration: General & Management Income	
15. Total Support/Revenue	

EXPENSES

	Total Expenses	Expenses Covered By Requested Grant
16. Salaries of provider staff		
17. Fringe benefits		
18. Professional fees (contract, consultant)		
19. Supplies (consumable)		
20. Printing and postage		
21. Occupancy		
22. Phone and fax		
23. Travel and meetings		
24. Training		
25. Evaluation		
26. Equipment purchases		
27. Miscellaneous expenses		
28. Subtotal Direct Expenses		
29. Proration: General & Management Expenses		
30. Total Expenses		

31. Surplus (Deficit)	
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B. If you feel elements of your budget need explaining, please do so in no more than 1/2 page.

ROCHESTER AREA COMMON REPORT FORM INFORMATION FOR GRANTMAKERS AND GRANTSEEKERS

The Common Report Form (CRF) was developed in 1999 by the Rochester Grantmakers Forum and the Rochester Effectiveness Partnership program to facilitate the reporting process for both grantmakers and grantseekers, and to help them focus on results. Grantmakers and grantseekers worked together to create it.

Funders want to know about the actual outcomes of funded projects and what grantees have learned – both positive and negative outcomes - not just quantitative data about how many people were served or how many activities took place. Funders investing in our community and grantees delivering services need to understand whether or not particular program services make a difference in the lives of those who receive them. Examining outcomes helps an organization gain valuable information about how to strengthen its work and improve results for those who receive services. Communicating what is learned, including results, can also provide a platform to engage current funders, attract new funders and volunteers to support a program. We recommend that the Common Report Form be completed and sent to funders 12 months after their financial support is received unless they require a different reporting schedule.

This latest version of the CRF is a companion piece to the Common Application Form. The Common Report Form is most effective when a logic model is used to develop plans for the funded project or capital purchase, and results are tracked through that logic model.

If you have little or no experience developing logic models or determining the impact of your services we refer you to:

1. The **Rochester Area Logic Model** located on the Grantmakers Forum of New York website (www.grantmakers.org). This information site contains a downloadable logic model, guidelines for developing a logic model, and samples of completed logic models. Copies of this information are also found in the printed *Guide to Grantmakers in the Rochester Area*.
2. **Rochester Area Logic Model Training** is available from Cornell Cooperative Extension (see Resources). Both Basic and Advanced level trainings are offered on a regular basis. The Basic Training includes: What a Logic Model is; Uses of a Logic Model; How to Develop a Logic Model. The Advanced Training includes: Indicators for Measurable Outcomes; Evaluation Strategies; Uses of the Logic Model in Management Decisions. Contact Margaret O'Neill at 585-461-1000 x222 to request a brochure containing listing upcoming training dates and a registration form. This training is partially funded by local funders which has kept it at an affordable cost.
3. The *Program Evaluation Manual* developed by the United Way of Greater Rochester. It describes a step-by-step process that you can use, even if you are not a United Way-funded agency, to track the effects of your work. Call Patricia Davis, Director, Operating Practices, United Way of Greater Rochester, 585-242-6561, to request a copy.

ROCHESTER AREA COMMON REPORT FORM

Please answer the following as completely and succinctly as possible.

Submit this report 12 months after receiving a grant unless the funder requires a different reporting schedule.

SECTION A (Complete Section A directly on this sheet.)

Organization completing report:

Address:

Contact Person:

Phone:

Project Name:

Funder receiving report:

Grant Amount:

Report Due Date:

This report covers the time period of _____ (date) to _____ (date).

Type of Support: ___Capital: ___construction ___renovation ___equipment
 ___Endowment
 ___Program/Project
 ___General support for agency operations
 ___Other (describe)

Your signature:

Your title:

Date:

SECTION B: FUNDER'S NOTES (leave blank for funders to make notes here)

SECTION C

- 1) Use the attached form to compare your original budget with actual figures. Explain any variations from the original budget that are larger than 10%.

Answer items 2-5 in up to 2 pages:

- 2) Has this grant been instrumental in attracting additional support in the form of people, money, goods, services or publicity? If so, describe.
- 3) Review your logic model (or original plans, if no logic model exists for this effort) and:
 - a. Provide information about each outcome you indicated you would track.
 - b. Describe and explain any significant variances from the original plans outlined in the logic model.
- 4) Lessons Learned: What have you learned, e.g. about effective program strategies, realistic outcomes, usefulness of the logic model (include any feedback you want us to have about the logic model), on-going value of the project.
- 5) If applicable, summarize your current plans for the project's future:
 - a. Programming envisioned
 - b. Financial support envisioned
 - c. Your ability to secure necessary support in the future

1. FINANCIAL REPORT

A. Provide the following information regarding the program or project for which you received funds.

SUPPORT/REVENUE	BUDGETED	ACTUAL
	Total Anticipated Support/Revenue	Actual Support/Revenue
1. Requested grant		
2. Fundraising events		
3. Gifts/bequests		
4. Miscellaneous contributions		
5. Foundation/corporate grant support		
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7. Grants/contracts: govt. agencies		
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14. General & Management Income (prorated)		
15. Total Support/Revenue		

EXPENSES	BUDGETED	ACTUAL
	Total Anticipated Expenses	Total Actual Expenses
16. Salaries of provider staff		
17. Fringe benefits		
18. Professional fees (contract, consultant)		
19. Supplies (consumable)		
20. Printing and postage		
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26. Equipment purchases		
27. Miscellaneous expenses		
28. Subtotal Direct Expenses		
29. General & Management Expenses (prorated)		
30. Total Expenses		

31. Surplus (Deficit)		
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B. Explain any variances between budgeted and actual figures that are larger than 10%.

3. ROCHESTER AREA LOGIC MODEL

(See attached Logic Model Section for guidelines and sample logic models.)

Program/Project _____ Agency _____ Date _____

Program/Project Time frame: _____

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