



## 2016 Grantee Organization Application Guidelines

### *Working Together to Support Community*

Rocky Mountain Children's Health Foundation (RMCHF) is a public charity. RMCHF was organized in 2008, and is operated exclusively for charitable and educational purposes.

RMCHF makes grants to programs and organizations that assist in accomplishing its mission. These procedures ensure that recipients are selected on an objective and nondiscriminatory basis.

#### **Mission**

The mission of Rocky Mountain Children's Health Foundation is to enhance the quality of life for pediatric patients and their families in the Rocky Mountain region.

**Eligibility:** For an organization's program(s) to be eligible for a grant from RMCHF, the organization must:

- Be a 501(c)(3) charitable organization in good standing in the Rocky Mountain region. **NOTE: *New or emerging organizations are permitted to apply through a tax-exempt organization acting as the fiscal agent.***
- Align with the mission and interests of RMCHF.
- Be a community based program that assists in filling important gaps in our communities for pediatric patients and their families.
- Demonstrate an ongoing commitment to inclusiveness, in its programs, staff, board, and volunteers.
- Have the capacity to fulfill the plans for which the funds are requested.
- Show a financial participation commitment from 100% of the board members. **NOTE: *The amount is not as much a concern as the demonstration of willingness to support the organization.***
- Provide an ongoing effort to evaluate organizational and program effectiveness and commitment to making adjustments as needed.

#### **Funding Priorities:**

- Provision, promotion and facilitation of educational and supportive programs regarding medical issues that affect children for the community, children, their parents and their healthcare providers.
- Existing community based pediatric programs which assist in accomplishing the above purposes.
- Enhancement of therapeutic programs to support holistic healing of children and their families.

**Generally, RMCHF does NOT make grants to or for the following:**

- Debt Restructure
- Capital-bricks and mortar
- Operational expenses of an organization
- Events
- Physician costs and healthcare expenses
- Grants to individuals
- Endowments
- For profit organizations or programs
- Government Programs
- Grants to one organization to be passed to another
- Religious organizations
- Camps
- Start-up costs
- Multi-year initiatives
- Direct medical costs

**2016 Cycle for Grants:**

- Grants shall be awarded one time during 2016.
- Grant applications are accepted between  
**May 15 – June 30** for a **September** grant determination

**Grant making capacity:**

- The total grant funding available is set by the board each year.
- Only one active grant per calendar year is permitted.
- Grant amounts vary and depend on many factors. Some important considerations include:

- Applicant organization's program budget
- Amount of support received from other sources
- Organizations may request up to \$25,000 in a year, although average grant awards typically range between \$3,000 and \$15,000.

**Notification:**

- If a grant is awarded, grantee shall use the funds for the sole purpose outlined in the grant request, unless specifically authorized RMCHF.
- If a grant in any amount is awarded, it is expected that **Rocky Mountain Children's Health Foundation** will be acknowledged as a partner, funder or sponsor as appropriate. RMCHF will work with each grantee to define recognition activities that suit their needs and those of RMCHF. Each grantee will be provided with comprehensive recognition guidelines and communications toolkit upon award.

Please note that RMCHF grant recipients may be required to:

- Use the RMCHF logo and name according to our guidelines and communications toolkit provided to the grantees.
- Recognize their funding publicly through recognition events, press conferences, photo opportunities, social media and news releases.
- Obtain advanced written approval of use of the name, logo or images of RMCHF and its programs.
- Acknowledge the funding in media releases, media interviews, annual reports, newsletters, social media activities, videos and promotional materials, both online and in print.
- Report on all recognition activities and media coverage in their Grant Project Summary Report.
- RMCHF respectfully requests that no plaques or memorials be used without prior RMCHF approval.
- Any unused grant monies should be returned RMCHF at the end of the grant period, unless specifically authorized.

**Project Outcomes for Previous Grantees:**

- Each grantee organization should submit a Grant Project Summary Report on the disposition of the funds and the most recent evaluation, results, findings or outcomes of the project within a year of the final payment of the grant.
- Application for repeat grants cannot be considered until the prior year's Grant Project Summary Report is received.
- The Grant Project Summary Report should include:
  - A brief (300 words or less) narrative on the completed project activities, including exact numbers of pediatric patients and/or families served with grant funds.
  - A short statement (2-3 paragraphs) regarding the relative success of the project compared to the initial goals and any lessons learned during the project.
  - Any data gathered during the project assessing satisfaction, increased capacity, effectiveness, outcomes, or measurable impact.
  - Although not mandatory, we would welcome the inclusion of photographs, testimonials, materials produced for the project, or other "collateral" data that would further describe your activities during the project.
  - The Summary Report should be signed and dated by the CEO/Executive Director or Board Chair.

## Rocky Mountain Children's Health Foundation

### Grantee Application Checklist

Please complete the following checklist and include it with your grant proposal, along with an Organization Summary Form (provided) and all attachments. Proposals cannot be considered until RMCHF has received all of the information requested. The Proposal **should not exceed three (3) pages**, plus attachments. Please provide one signed original and one copy of the grant proposal.

#### Organizational Information

- Mission, purpose and goals of the organization.
- Summary of the organization's history, principal programs and accomplishments.

#### Program Description

- Description of program goals and objectives.
- Brief statement of the issue/need to be addressed, the target population, approximate number to be served, and geographic area of service.
- Brief description of how the request aligns with Rocky Mountain Children's Health Foundation's Mission and priorities.
- Specific purpose for funds and amount of grant request.
- Explanation of collaborations with other programs.
- Timetable for program implementation and completion.
- List of other entities asked to provide funding for grant project and amounts requested.
- Long term plans for sustainability following the grant period.

## **Evaluation**

- Measurable objectives/outcomes expected for the end of the grant period and methodology used to evaluate program outcomes.

## **Attachments**

- Organizational Summary Form (Provided)
- Detailed program/project budget with budget narrative.
- Organizational operating budget for proposed grant period.
- List of Board of Directors with occupations/community affiliations.
- Percentage of Board of Directors who financially contribute to the organization.
- 501 (c)(3) determination letter (dated within the past 5 years).
- Prior year's annual report, if applicable.
- Prior year's audit or Financial Review report, if applicable.
- List of major funding sources over \$1,000 (including RMCHF if applicable) for the last fiscal year.



# Organization Summary Form

Organization Legal Name: \_\_\_\_\_

Organization DBA (if applicable) \_\_\_\_\_

Organization's Federal Employer Identification Number (EIN): \_\_\_\_\_

Physical Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Website: \_\_\_\_\_

Executive Director/Board Chair: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Phone: \_\_\_\_\_

## REQUEST INFORMATION

Amount of this Funding Request \$ \_\_\_\_\_

Brief Description of Request: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

By signing below, I certify that the information contained in this application is true and correct to the best of my knowledge.

\_\_\_\_\_  
CEO/Executive Director /Board Chair

\_\_\_\_\_  
Date