

# 2019 Request for Proposals Topic: Substance Use Disorders \$25,000 Grant

The Seacoast Women's Giving Circle is seeking proposals from organizations that address Substance Use Disorders. Substances include but are not limited to alcohol, cocaine, marijuana, methamphetamine, nicotine, and opioids.

Successful proposals will foster resiliency, reduce stigma, embrace principles of harm reduction, use a trauma-informed approach, and/or address the needs of the whole person.

# **Applicants must:**

- Be an approved 501(c)(3) tax-exempt organization
- Provide services in some or all of the following Seacoast towns of NH and Maine: Seabrook, Hampton, Hampton Falls, North Hampton, Rye, Portsmouth, New Castle, and Kittery

# The following organizations are generally NOT eligible for support:

- Religious or faith-based programs or organizations
- Political organizations or programs
- Organizations that discriminate in any way

### **Seacoast Women's Giving Circle Priorities:**

- Improving quality of life on the Seacoast
- Serving the socio-economically underprivileged
- Fostering independence and self-reliance
- Addressing emerging needs and issues
- Providing long-term solutions
- Investing in the expansion of existing organizations rather than the creation of new ones

### TIMELINE

# Friday, January 25, 2019: Proposals due

By April 5, 2019: Grant recipients notified

May 9, 2019: Fundraising celebration for 2019 grant recipients

Summer 2019: Funds distributed

# SEACOAST WOMEN'S GIVING CIRCLE 2019 \$25,000 GRANT APPLICATION

# **GRANT AMOUNT**

Generally speaking, the grant amount requested should not exceed 10% of your organization's annual budget.

Please email completed grant application and attachments in PDF format to:

# **2019 GRANT APPLICATION**

Please ensure all required documents are included. Proposals are considered only when all components of the grant application are submitted.

	give.swgc@gmail.com	
	Summary FormNarrativeAttachments A, B, and C	
	SUMMARY FORM – REQUIRED	
1.	Name of Organization	
2.	Legal name (if different)	
3.	Grant amount requested (\$10k or \$25k)	
4.	Organization Federal Tax I.D.#	
5.	Organization address	
6.	Phone number	
7.	Website address/Facebook	
8.	Year founded	
9.	Executive Director's Name	
10	. Contact person for this proposal (Name, title, phone, email)	
11	. Organization mission/vision statement	
12	Statement of grant purpose ("This grant will be used to")	
13	Constituents served by organization (Include number of people served and their demographics)	

# SEACOAST WOMEN'S GIVING CIRCLE 2019 \$25,000 GRANT APPLICATION

14. Geographical area served by organization (Specify number of constituents served within SWGC catchment area, listed on page 1)	
15. Which of the following are supported by this proposal? Please list in order of priority	
Foster Resiliency Reduce Stigma Embrace principles of harm reduction Use a trauma-informed approach Address the needs of the whole person	
16. Which of the SWGC priorities does this grant address?	
Improving quality of life on the Seacoast	
Serving the socio-economically underprivileged	
Fostering independence and self- reliance	
Addressing emerging needs and issues	
Providing long-term solutions	
Investing in the expansion of existing organizations rather than the creation of new ones	
17. Annual operating budget (\$)	
18. Number of paid staff (part/full-time)	
19. Number of volunteers (excluding board members)	
20. Size of Board of Directors	
21. How did you learn of this grant opportunity?	

# SEACOAST WOMEN'S GIVING CIRCLE 2019 \$25,000 GRANT APPLICATION

### NARRATIVE - REQUIRED

The total length of the narrative section should not exceed 4 pages in size 12 font.

# 1. Organization Overview

Provide an overview of your agency, its history, mission, vision, and primary programs and services. Please emphasize major organizational achievements and outcomes that serve your mission. What role does your organization play in serving the greater community?

### 2. Proposal

Provide a detailed description of the need this proposal addresses and how you plan to use the SWGC funds.

#### 3. Measure of Success

How will you evaluate the success of this proposal? Please include qualitative and quantitative measurables.

# 4. Funding Plan and Sustainability

Provide a detailed budget for your proposal. What, if any, funding is required outside of the SWGC grant and how will you secure it?

#### 5. Resources and Timeline

Discuss the resources available to implement this grant proposal (i.e. staff/board time, skills, commitment). Provide a timeline for use of funds. Does your timeline align with the SWGC funding availability of Summer 2019?

### 6. Collaboration

Do you collaborate with other organizations to accomplish your goals? What does each of you bring to the table and how do you avoid duplication of efforts?

7. Is there anything else we should know?

# ATTACHMENTS - REQUIRED

Please clearly label all attachment files with your organization's name. Please provide:

- **A.** Organization's most recently filed 990 Form. Please include income statement, balance sheet, current operating budget, and breakdown of organizational revenue sources for past fiscal year (include any Federal, State, Corporate or Individual giving).
- **B.** Board of Directors list, including length of service.
- **C.** Executive Director biography including length of service with this organization.