

## **REGION 2: Healing Illinois - Project Support Application**

Applications will be accepted through December 1, 2023 at 11:59 p.m. CST.

Applications received by December 1, 2023 will be reviewed and notified by December 18, 2023.

### **Organization Information**

1. Name of organization
2. Mission/Vision
3. Year Founded
4. Organization EIN
5. IRS Status
6. GATA Certified: Yes or No
7. Primary Contact Name
  - Primary Contact Email
  - Primary Contact Phone
8. Primary Address:
9. Executive Director/CEO Name
  - Executive Director/CEO Email
  - Executive Director/CEO Phone
10. Executive Director/CEO/President - Ethnic and Racial Identity
11. Website
12. Social Media 1
13. Social Media 2

### **Organizational Diversity**

14. Staff Composition | Is your staff primarily (more than 51%) paid/volunteer/combination of both
15. FTE - Staff - Total | Enter the total number of FTE (full time equivalent) staff members in the organization.
16. FTE - Staff - BIPOC | Enter the number of BIPOC individuals serving as FTE staff members in the organization. Do not include volunteers.
17. Leadership | Is the senior leadership and board directed, managed, and/or led by a majority of BIPOC individuals (51% or more).
18. Board Size Total

### **Application Summary**

19. Project Name
20. Project Summary (1500 characters)
21. Total Project Budget
22. Grant Request Amount:
23. Geographic Area served by project
24. Funding Priority:
  - Racial Healing Sustainability
  - Narrative Change

- Education and Training
  - Racial Healing Readiness
25. Estimated number of participants
  26. Estimated number of activities associated with the project
  27. Target population | Ethnic and Racial Groups Served
  28. Tell us about your project idea. Who? What? When? Where? Why? (3000 maximum characters)
  29. How do you know your organization is ready for this work and has the capacity to do it? (3000 maximum characters)
  30. What problem/issue/community need are you addressing? (3000 maximum characters)
  31. Describe associated short outcomes of the project. (3000 maximum characters)
  32. How will you measure impact?

### **Media**

33. Please submit a high-resolution image of organization logo. This will be used on the Healing Illinois website and social media platforms if your application is approved.

### **Financial Information**

34. Fiscal Year End Date:
35. Annual Operating Budget:
36. Most Recent Financial Statements

**\*Complete application should be combined into one single PDF, in the order listed above, and emailed to [healingil@ywcanwil.org](mailto:healingil@ywcanwil.org). Please remember to also attach a high-resolution image of organization logo**