

Sample Grant Application (adopted January 2025)

This sample is provided for informational and planning purposes only. The application is available online through our grant portal at www.MultnomahAthleticFoundation.com

Qualification Questions

- 1. Is the organization a registered and certified as a tax exempt 501c3 nonprofit organization?
- 2. Is the organization focused on enabling and inspiring youth in athletic programs, athletic participation or educational support?
- 3. Is the organization's community outreach in Multnomah, Washington and Clackamas counties in Oregon?
- 4. Is the organization utilizing the funding directly through their community outreach and service?
- 5. What percentage of your organization's work is dedicated to athletic programming?

Organization Information

- Legal Name
- Is there another name? (DBA)
- Federal Tax ID Number
- Upload the current Tax Exemption IRS letter PDF only
- Street Address
- City
- State
- Zip Code
- Primary Telephone Number
- Website
- Number of paid full time staff members
- Number of paid part time staff members
- Number of volunteers per year
- Mission Statement: 150 word maximum (spaces not counted in word count)
- Briefly describe the organization's target audience and geographic area of service, scope of community outreach and how the outreach is aligned with the stated objectives of the MAF. 150 word maximum (spaces not counted in word count)
- Explain how you connect with kids and their support networks to get involved. 150 word maximum (spaces not counted in word count)
- Is financial need or limited access a consideration for youth assistance from your organization and /or program? If so, how do you determine the need? 150 word maximum (spaces not counted in word count)

Request Information (more than 60%)

- Explain the organization's top three initiatives for the next 2–3 years and its key needs. 600 word maximum (spaces not counted in word count)
- Provide a brief description of your current situation and why you are requesting the grant. Include specific
 challenges and opportunities facing your organization and the use of the funds. 600 word maximum (spaces not
 counted in word count)
- What primary community need does the organization's programming address? 300 word maximum (spaces not counted in word count)
- Describe the sport, athletic activity and education support this grant request would support (directly or indirectly). 300 word maximum (spaces not counted in word count)

- How is your organization evaluate impact? Please be specific about who evaluates, when, criteria for judging success (i.e. dollars saved, problem solved, etc.) 300 word maximum (spaces not counted in word count)
- How do you define success in serving youth and supporting the organization? 150 word maximum (spaces not counted in word count)
- How has collaboration with other organizations or community resources helped your organization? 150 word maximum (spaces not counted in word count)
- Tell us about relevant support provided to the youth and their families for example, support in education / tutoring, nutritional / food resources, or other wrap around services. 150 word maximum (spaces not counted in word count)

Request Information (less than 60%)

- Purpose of the request 300 word maximum (spaces not counted in word count)
- Tell us about the short and long-term strategies developed to address identified organizational needs. 600 word maximum (spaces not counted in word count)
- Provide a brief description of your current situation and why you are requesting the grant. Include specific
 challenges and opportunities facing your organization and the use of the funds. 600 word maximum (spaces not
 counted in word count)
- What community need does this project/program address? 300 word maximum (spaces not counted in word count)
- Describe the sport, athletic activity and education support this grant request would support (directly or indirectly). 300 word maximum (spaces not counted in word count)
- Describe this project/program and the requested funding by number of participants impacted by athletic program and frequency/duration of contact with participants (daily, weekly, summer camp, event etc.) 300 word maximum (spaces not counted in word count)
- How is this project/program/initiative evaluated? Please be specific about who will evaluate, expected dates for assessment, criteria for judging success (i.e. dollars saved, problem solved, etc.) 300 word maximum (spaces not counted in word count)
- How do you define success? 150 word maximum (spaces not counted in word count)
- How has collaboration with other organizations or community resources helped your organization? 150 word maximum (spaces not counted in word count)
- Tell us about relevant support provided to the youth and their families for example, support in education / tutoring, nutritional / food resources, or other wrap around services. 150 word maximum (spaces not counted in word count)

Financial Information

- Describe any significant changes in your income and expenses during the current fiscal year or projected into the
 next fiscal year including any additional comments of clarifications to the program's financial status you wish to
 provide. 300 word maximum (spaces not counted in word count)
- If insufficient money is raised, how will that affect the organization's community outreach? 150 word maximum (spaces not counted in word count)
- Upload current balance sheet and organizational budget
- Upload current program budget if funding is related to the grant request (if athletic programming is less than 60%)

Past Grant Information

- Has the organization received prior funding from the Multnomah Athletic Foundation in the past 5 years?
 - Date Award Received
 - Amount
 - o Purpose

Certification

I certify that I am authorized to submit this grant request on behalf of the organization that will operate on the proposed project.

Contact Information for the organization's executive officer (Executive Director, CEO, President, etc.)

Name

Title

Address

City

State

Zip Code

Telephone Number

Email Address

Primary Contact for Request (if different from above)

Name

Title

Email Address

Telephone Number

Address

City

State

Zip Code