

Special Application

The Norcliffe Foundation

Instructions

This application is for requests greater than \$50,000. Contact us before making a request of this size; you will need an invitation code to access this application.

*Please complete the following questions concisely and avoid repeating information. Bullet points are encouraged. Character counts include spaces. * Indicate required fields.*

All file uploads require a PDF document.

Organizational Information

Mission Statement*

Enter your organization's mission statement.

Character Limit: 500

Organizational Legal Name

(if different)

Character Limit: 250

IRS Ruling Date*

Indicate the year your organization received 501(c)(3) status.

Character Limit: 4

Impact Area*

Select the *primary* program area for your organization.

Choices

Arts & Culture
Civic & Community
Education
Healthcare
Human & Social Services

Primary Program Focus*

Select the *primary* program focus of your organization. Please choose only one.

Choices

Academic Enrichment/Support

Addiction Recovery
Adoption & Foster Care
Aging Care
Animal Welfare
Childcare
Civic Involvement
Climate Change
Clinic/Hospital
Conservation & Preservation
Crisis Intervention
Dental
Early Learning
Economic Opportunity
Employment Training & Workforce Development
Food Access/Security
Housing & Homelessness
K-12 Private Education
K-12 Public Education
Legal & Advocacy Services
Libraries
Media
Medical Research & Innovation
Mental & Behavioral Health
Museums
Parks & Community Centers
Performing Arts
Post Secondary Education
Religious or Faith-Based Services
Service Animal
Visual Arts
Youth Development

Secondary Program Focus

You may list up to four secondary service areas that your organization addresses. They may be from the list above or not included in that list.

Character Limit: 250

Primary Geographical Impact*

Select the *primary* county that will be impacted by this grant.

Please note: If your program does not impact one of these areas, you are outside of our geographical guideline.

Choices

Island
Jefferson
King
Kitsap

Mason
Pierce
San Juan
Skagit
Snohomish
Thurston
Whatcom

General Purpose*

Describe the work you do to fulfill your mission. What gap are you filling and what unique role does the organization play in providing these services?

Character Limit: 3000

Full-Time Staff*

How many paid full-time employees or contractors does your organization have? If none, please enter "0".

Character Limit: 5

Part-Time Staff*

How many paid part-time employees or contractors does your organization have? If none, please enter "0".

Character Limit: 4

Complementary Organizations

Describe how your organization may work or collaborate with others in the sector.

Character Limit: 2000

Board List*

Input a list of your board of directors.

Character Limit: 3000

Organizational Changes

Are there any significant changes to your organization, programs, leadership, or structure that have been recently made or that you anticipate? If yes, please briefly describe.

Character Limit: 1500

Request Information

Amount of this request*

Character Limit: 20

Grant Type*

Choices

Capacity Building Project
Capital or Comprehensive Campaign
Program or Project Support

Project Name*

Name of the project, program, or campaign for which you are requesting support.

Character Limit: 100

Brief Summary*

Provide a sentence or two about your request.

Character Limit: 400

Proposal*

Tell us about the project for which you are requesting support.

Character Limit: 8000

Timeline*

Describe the timeline for this work.

Character Limit: 1000

Evaluation*

How will you monitor your work to learn about changes that need to be made and/or to measure success?

Character Limit: 3000

Challenges

What (if any) challenges do you anticipate and how will you address them?

Character Limit: 2000

Financial Information

Operating Budget*

Enter the total amount of your organization's current annual operating budget and upload a one-page budget showing expenses and income.

Character Limit: 20 | File Size Limit: 2 MB

Annual Fundraising Goal*

Enter the total amount of your organization's annual budget that comes from private philanthropy.

Character Limit: 20

Project Budget*

Enter the total expenses for the program, project, or campaign and upload a one-page budget showing expenses and income.

Character Limit: 20 | File Size Limit: 2 MB

Project Philanthropic Goal*

Indicate the fundraising goal for *private philanthropy* for the project. Do not include government grants, tax-credits, or any earned revenue that will be applied towards project expenses.

Character Limit: 20

Fundraising Plan & Status*

What are your potential and actual sources of philanthropic support for this project? Please upload a list of funding received, pending, denied, or planned (identifying the source and amount for each). Be as specific as possible.

File Size Limit: 3 MB

Other

Anything else?

Is there anything else you would like us to know about your work or proposal?

Feel free to upload an attachment if necessary. This is the place to include renderings for capital projects, brochures for programs, etc.

Character Limit: 2000 | File Size Limit: 5 MB