

# FBCF Regular Grant Process- FINAL for export to live site

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*Farmington Bank Community Foundation*

## *Instructions*

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Welcome to the application portal for the Farmington Bank Community Foundation. Applications are accepted quarterly based on the schedule outlined here. Note that the application portal **will close at 6 p.m.** on the date that applications are due, which is generally the last day of the month. Organizations are eligible to receive one grant per year, must be providing significant services within the Foundation's funding region, and must be aligned with the Foundation's funding priorities.

A few notes as you complete the application:

- After you submit your application, please check your e-mail for confirmation of your submission.
- Once an application is submitted, you are not able to edit your responses. Please review your application carefully before submission.
- After submission, you may be contacted by Foundation staff with additional questions about your request, or to conduct a site visit.
- Award notifications are made two months after the application due date. So if they application is due January 30th, you can expect notification about an award on our around March 30th.

Please reach out to Erika Frank at [fbcf@fbcfct.org](mailto:fbcf@fbcfct.org) with any questions.

## **Returning Applicants**

Returning applicants that submitted an application in 2024 or after have the option to "copy" question responses from a prior year. Use the blue "copy previous answers" button at the top of the page. The prior year's responses must be updated with current information prior to submission.

A tutorial on the "Copy" function can be found [here](#).

## New Applicants and Programs

We encourage new applicants, or returning applicants seeking support for a new program, speak to Foundation staff prior to submitting a request. While a conversation does not guarantee an award, Foundation staff can help determine alignment, eligibility, and share more detailed information on the Foundation's grantmaking.

If you are a new applicant or seeking funding for a new program, please confirm that you have communicated with Foundation staff ([fbcf@fbcfct.org](mailto:fbcf@fbcfct.org)).

### Choices

Confirm

## Fiscal Sponsor\*

Is your organization applying through a fiscal sponsor/agent? Note, if you respond "yes" to this question you will be asked to input additional information below.

### Choices

Yes

No

Applicants that want to collaborate with other members of their team on the application may use the collaborator feature.

*Video Tutorial (2 minutes long)*  
*Written Tutorial*

## *Fiscal Sponsor Information*

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You indicated that this grant is being requested through a fiscal sponsor or fiscal agent. If this is the case, please ensure that the information provided during registration is for the fiscal agent/sponsor organization (the entity that is the legal applicant for the grant). Please complete the following information for the entity that is being sponsored.

As you complete the application, please answer questions for the program/project/entity that is requesting funding (not the fiscal agent/sponsor). However, the organizational financials submitted should be those of the fiscal sponsor/agent.

## Fiscally Sponsored Entity\*

Please provide the name of the entity/program/project being fiscally sponsored through this application. Please provide the primary contact information (name, phone, e-mail) for the entity.

*Character Limit: 100*

## *Organization Information*

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### **Organization Mission\***

Please share the organization's mission statement.

*Character Limit: 1000*

### **Organizational Programming\***

Briefly describe the organization's core programs.

*Character Limit: 2500*

## *Program Information*

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### **Program Name\***

*Character Limit: 100*

### **Community Need\***

Briefly describe the community need you are trying to address through the requested grant. If applicable, please include any recent trends or shifts in community need that your organization sees through its work.

*Character Limit: 4000*

### **Program Description\***

Briefly describe the program or project you intend to implement and your rationale as to how it will meet the need described above.

*Character Limit: 4000*

### **Impact Measurement\***

Briefly describe what and how you intend to measure to determine the impact of your program. This includes outputs such as expected number of meals to be served, or expected number of individuals to receive training. It may also include outcomes, such as number of individuals expected to be placed in jobs or the number of participants expected to increase their knowledge after program participation.

*Character Limit: 3000*

### **Total Program Budget\***

Provide the total projected budget for the program during the grant period, inclusive of the request to the Foundation.

*Character Limit: 20*

### Amount Requested\*

Note that the Foundation's current maximum grant size is \$12,500, with grants of up to \$15,000 awarded in special circumstances.

*Character Limit: 20*

### Use of Funds\*

Briefly describe how Farmington Bank Community Foundation funds will be used.

*Character Limit: 1000*

### Geographic Area Served\*

Please select the towns in the Foundation's service area that will primarily be served **by the proposed grant**. Only select towns where the organization will directly provide services or target a meaningful number of residents. If the program is not focused specifically on residents of one or more towns, but instead serves the region as a whole, or the state as whole, please select that option below.

#### Choices

Region-wide  
 Statewide  
 Avon  
 Berlin  
 Bloomfield  
 Bristol  
 Burlington  
 Canton  
 Farmington  
 Hartford  
 Newington  
 New Britain  
 Plainville  
 Rocky Hill  
 Simsbury  
 Southington  
 West Hartford  
 Wethersfield

### Population(s) of Focus\*

Please select the population(s) that this grant specifically seeks to support. Only select populations that are a specific focus of the program.

#### Choices

Young Children 0-Pre-K  
 Students Grades K-8  
 Students Grades 9-12  
 Students Postsecondary  
 Seniors

Specific Ethnic and/or Racial Groups (see branched question below if this is selected)

Immigrants, Migrants, or Refugees

LGBTQIA+ People

Military Personnel or Veterans

People Experiencing Homelessness

People with Disabilities

People with Mental Health Needs

People with a Substance Use Disorder

People with Diagnoses or Illnesses

People with Justice System Involvement

People with Low or No Income

Survivors/Victims of Crime and Abuse

Women/Girls

Other (will be asked define)

## Grant Updates

If you are requesting funds for a program that was funded by Farmington Bank Community Foundation in a prior year(s), please discuss outcomes of the program over the past year, any challenges, lessons learned or changes implemented.

*Character Limit: 4000*

## Geographic Area Served

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### Statewide Organization\*

You selected "Statewide" when asked about the geographic location to be served in the requested grant. Please provide additional detail about how this grant is expected to benefit the funding area of the Farmington Bank Community Foundation, local partners in our funding region, etc.

*Character Limit: 1000*

## Ethnic and Racial Groups

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### Ethnic and Racial Groups\*

You selected "Ethnic and Racial Groups" as a population of focus for this grant request. Please select all that apply to provide more detail regarding the population served.

#### Choices

Asian/Asian American/Pacific Islander

Black/African American/West Indian

Hispanic/Latino/Latina/Latinx/Latine

Middle Eastern or North African

Multi-Racial/Multi-Ethnic (2+ races/ethnicities)

Native American/American Indian/Alaska Native/Native Hawaiian/Other Indigenous Groups

White

Other race and/or ethnicity

## *Attachments*

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### **Project Budget\***

Provide a project budget including sources and uses.

*File Size Limit: 1 MB*

### **Organizational Budget\***

Provide the organization's line-item budget for the current fiscal year.

*File Size Limit: 3 MB*

### **Balance Sheet\***

Provide a recent balance sheet.

*File Size Limit: 3 MB*

### **Profit and Loss Statement\***

Provide a recent P&L statement.

*File Size Limit: 3 MB*

### **Optional Attachment**

Feel free to attach anything else that you would like the Foundation to review with your application (photos, annual report, impact report, brochure, etc.)

*File Size Limit: 3 MB*

After you submit this application, please check your email for the submission confirmation.