

# Harvest Ball Society Grant Application

## Selection Process

The Harvest Ball Society is focused on the most prevalent needs of the Northland. Grant applicants should address at least one of the following criteria with their program or project and please check the category:  **hunger**;  **basic needs** such as shelter or clothing;  **access to healthcare** including mental health, senior citizen needs. The 2015 Northland Community Needs & Health Assessment and Vision North 2010-2015 needs assessment serve as the foundation for establishing the above categories of priority needs in the Northland.

## Organization Information

**For your application to be considered you must complete all of the required information in this application, including the required attachments, and submit the application by 5:00 p.m. April 30, 2017. All applications must be submitted online. There will be no exceptions.**

**Organization Name** \_\_\_\_\_

Please use the name of your organization as it is filed with the IRS.

**Tax ID** \_\_\_\_\_

**If applicable, provide any other name the organization may operate as.**

**Mailing Address** \_\_\_\_\_

**City** \_\_\_\_\_

**State**

MO

**Zip/Postal Code** \_\_\_\_\_

**Web Site** \_\_\_\_\_

**Organization's Primary Leader Information (such as an Executive Director, President or Board Chair)** \_\_\_\_\_

**Job Title** \_\_\_\_\_

**First Name** \_\_\_\_\_

**Last Name** \_\_\_\_\_

**Phone Number** \_\_\_\_\_

**Email Address** \_\_\_\_\_

**Grant Application Contact Person**

Electronic confirmation of grant application submissions will be sent by e-mail to the e-mail account used to manage this online application.

**Grant Application Contact Full name** \_\_\_\_\_

**Job Title** \_\_\_\_\_

**Phone Number** \_\_\_\_\_

**Email Address** \_\_\_\_\_

## Application Questions

**Organization Primary Focus** \_\_\_\_\_

**Organization's Annual Operating Budget** \_\_\_\_\_

Organization's total projected expenses for the current fiscal year; projected total expense for the current year in Clay and Platte counties. \_\_\_\_\_

**Organization's Founding Date** \_\_\_\_\_

**Mission Statement**

What is your organization's mission? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Organization’s Description**

Describe the organization, including a brief description of the organization’s primary programs (no more than three.) \_\_\_\_\_

\_\_\_\_\_

**Board of Directors Summary**

List the names of the organization’s board of directors and include board positions. Please note if a board member lives or works in Clay or Platte County. (If a printed list already exists, you can include this with attachments and place a star next to the Northlander’s name).

**Staff Summary**

First, list the names and titles of the organization’s senior staff, including executive director, and include the names and titles of the key staff that will contribute to the proposed program or project. Second, provide a breakdown of the number of **full time, part time, and volunteer** positions for the organization. \_\_\_\_\_

Does your organization have paid development/fund raising staff? If so, how many? \_\_\_\_\_

**Volunteer Opportunities**

Please describe any volunteer and/or partnership opportunities within the proposal for Harvest Ball Society members and their families. \_\_\_\_\_

\_\_\_\_\_

**If you are selected to receive funding this next year, the Harvest Ball Society will request a date for a site visit (no more than one hour for 10-12 HBS members) where you will share more about your organization. The Harvest Ball Society wants to better identify with those organizations it serves and to be able to help tell your story to the community.**

a. Who is the best person from your organization to coordinate this visit? \_\_\_\_\_

b. If confidentiality of clients is a concern for a site visit, an overview of your organization and a limited tour is acceptable. \_\_\_\_\_

**Is your organization interested in partnering with a group, the Friends of Harvest Ball Society, during 2017 for one or both of the following:**

a. A short term volunteer work project to benefit your organization? \_\_\_\_\_

b. Someone from your organization speaking to attendees at a social event for the Friends of Harvest Ball Society regarding your mission? \_\_\_\_\_

**Attachments**

Title \_\_\_\_\_ File Name \_\_\_\_\_  
Program/Project Budget  
Annual Operating Budget and percentage in the Northland  
List of Board Members with those living or working in the Northland starred (\*)  
990 Tax Return  
501 c3 Status Letter

**This year, the Harvest Ball Society application is divided into two categories. If you are seeking a grant of \$7500 or less, please proceed with Category One. Otherwise, please complete the section under Category Two with additional questions.**

**Category One- \$7500 or less**

**Program or Project Name** \_\_\_\_\_  
Provide a brief description name for the program/project. \_\_\_\_\_  
\_\_\_\_\_

**Total Amount Requested (\$)** \_\_\_\_\_

**Program or Project Overview**

Provide a brief history and overview of this program/project. How will the money be spent?  
Who will be served by this project? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Category Two- greater than \$7500**

**Program or Project Name** \_\_\_\_\_  
Provide a brief description name for the program/project. \_\_\_\_\_  
\_\_\_\_\_

**Total Amount Requested (\$)**

**Program or Project Overview**

Provide a brief history of this program/project and describe the principal activities you plan to conduct and complete or continue, using the Harvest Ball Society's grant funds. ? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Outcomes**

Describe the major outcomes or benefits you expect from completing the above activities and indicate the time periods (month, quarter or year) within which you expect to achieve each. What information or evidence will you use to verify success? What have you achieved in the past three years to help meet your goals of the program? \_\_\_\_\_

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**Beneficiaries**

Define the number and characteristics of the people your proposal will serve. Identify the specific geographic areas that will be served by your proposal. What other non-profits are doing similar work in the Northland and how are you different? \_\_\_\_\_

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**Collaborations/Partnerships**

What collaborations are you a part of and how do they improve outcomes? Explain the specific role that these organizations will play in the proposal. \_\_\_\_\_

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**Impact Grant**

Harvest Ball Society will consider impact grants of \$25,000 +. If your organization has a big idea for a major program/project that addresses an identified need in the Northland, especially if it is a collaboration, contact the HBS endowment committee through Linda Ward at [linda.doolin.ward@gmail.com](mailto:linda.doolin.ward@gmail.com). The endowment committee will consider ideas throughout the year, but will not necessarily offer a grant each year.