

**PLEASE READ OUR GUIDANCE DOCUMENT**

**CHEJ Small Grant Application – Round 1, Tier 3 Organizations**

**Use this application for organizations whose annual budget is over $250,000 but less than 1 million ($1,000,000).**

**Application deadline: Friday, February 2nd, 2024, at 12:00 Midnight EST**

It is recommended that project activities be creative, effective, and/or strategic. Grant awards in this tier range from $10,000 to $20,000 per group. The project must be completed and a final report submitted by September 6, 2024.

Although we believe that many field efforts are valuable in creating change, our resources are limited.

**Grant activities can include:**

|  |  |
| --- | --- |
| * Board development | * Organization’s membership outreach |
| * Fundraising efforts | * Meetings to develop organizing and/or Strategic Plans, and events that are part of that plan |
| * Training leaders to go door-to-door for community organizing efforts | * Equipment and/or subscriptions for communications (i.e., Zoom subscriptions, internet access, laptops, etc.) |
| * Educational activities directly connected to your stated Strategic Plan | * General in person events |

**Projects we are *not* likely to fund:**

|  |  |
| --- | --- |
| * Film productions | * Organizing outside of the United States |
| * Individuals | * Legislative lobbying |
| * Natural environmental protections | * Environmental testing |
| * Legal assistance | * Groups with an annual budget of over one million dollars ($1,000,000) |

**Applications can be submitted as a Word Doc or Google Doc.**



**THIS COVER SHEET MUST BE COMPLETED FOR ALL REQUESTS FOR SUPPORT**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Date of Application:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Current Annual Operating Budget:  $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Year Founded:  \_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Name of Organization:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| Mailing Address:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| City:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | State:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Zip Code:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Mailing address if different from above:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| Executive Director:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | Email:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Contact Person (if different than Executive Director):  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| Email:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| Phone 1:  ( ) - - | | | Phone 2:  ( ) - - | |
| Website:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | Facebook Page:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Amount Requested:  $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | Total Project Costs:  $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Past Grantee (Y/N):  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Project Name:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| Purpose (please limit to 50 words): | | | | |
| Project Goals (please limit to 50 words): | | | | |
| Fiscal Sponsor Name and contact information (if Identified and Should You be Utilizing One):  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |

**I CERTIFY, TO THE BEST OF MY KNOWLEDGE, THAT:**

* The tax-exempt status of this Organization and/or our Fiscal Sponsor is still in effect,
* This Organization and/or our Fiscal Sponsor does not support or engage in any terrorist activity, and
* If a grant is awarded to this Organization and/or our Fiscal Sponsor, the proceeds of that grant will not be distributed to or used to benefit any organization or individual supporting or engaged in terrorism or used for any unlawful purpose.

This must be signed by the Organization that will complete the project, ***not the Fiscal Sponsor***.

Signature: *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

Print name and title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Note*: For your application to be considered, **you are required to use the cover sheet and budget page** that is included as part of this application. Submit to CHEJ by **Friday, February 2nd, 2024, at 12:00 Midnight EST to** [**grants@chej.org**](mailto:grants@chej.org).

Please answer the following questions and submit a completed application of **no more than three (3) pages, plus the cover sheet and budget page (a total of five [5] pages).**

Please **do *not* use a 10-point font**; **12-point is preferred**.

1) What issues are your group working on? How long has your group been working on these issues?

2) What are your group's goals? Has your group had any achievements? If so, briefly describe.

3) Is your group led by people from an impacted community? How many members/people are involved in your group's activities?

4) Please describe your group's proposed project. The project should build leadership and/or build your group's capacity by expanding community participation or strengthening your group. Also, include a short summary of your next steps after project completion. Note: A small number of general support grants can be awarded.

5) Is the issue your group is working on at a critical juncture? Why would it be timely and helpful if your group received the funding for the proposed project?

**Fiscal Sponsor Information**:

Should your group not be incorporated and does not have a bank account, you will need to identify a group that can accept the funds for your group, such as a church or other non-profit that will serve as a "fiscal sponsor" to accept the funds. Please provide your group's identified fiscal sponsor's name and contact information, if it is available at the time of this application.

**Reminder: Applications are due by Friday, February 2nd, 2024, at 12:00 Midnight EST.** Please send your application form to CHEJ at [**grants@chej.org**](mailto:grants@chej.org).

**If you have questions about the grant application form or the grant process, please contact the CHEJ Small Grants Team at** [**grants@chej.org**](mailto:grants@chej.org)**.**

The Small Grants Training Zoom call will be on Friday, February 19th, 2024, at 12:00 PM EST. **To receive a recording, you must register for the training.**

**Please complete this Tier-3 Budget Form for your project:**

**CHEJ 2024 - Small Grants Round 1**

**Tier-3 Budget Form**

**Organization Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Grant Period Ending Sept 6th, 2024.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Expenses for the Proposed Project** | **Project Budget** | **Other Funding Sources** | **Requested from CHEJ** |
| **Personnel** |  |  |  |
| Salaries and Wages | $ |  |  |
| Payroll Taxes | $ |  |  |
| Benefits | $ |  |  |
| Consultant fees | $ |  |  |
| **Total Personnel Expenses** | $ |  |  |
| **Operations** |  |  |  |
| Rent | $ |  |  |
| Utilities | $ |  |  |
| Telecommunications | $ |  |  |
| Postage | $ |  |  |
| Printing and copying | $ |  |  |
| Equipment | $ |  |  |
| Supplies | $ |  |  |
| Travel | $ |  |  |
| **Total Operations Expenses** | $ |  |  |
| **Events** |  |  |  |
| Event-Related Facility Space | $ |  |  |
| Event-Related Supplies | $ |  |  |
| Event-Related Travel | $ |  |  |
| **Total Event Expenses** | $ |  |  |
| **TOTAL EXPENSES** | $ |  |  |
| **Revenue for this Project** |  |  |  |
| Grants/Contracts/Contributions | $ |  |  |
| Government Local/State | $ |  |  |
| Foundations | $ |  |  |
| Corporations | $ |  |  |
| Individuals | $ |  |  |
| Membership Income | $ |  |  |
| In-Kind Support | $ |  |  |
| Other | $ |  |  |
| **Total Revenue** | $ |  |  |

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