Grotta Grant Application 2023

Grotta Fund for Senior Care - Jewish Community Foundation of Greater MetroWest New Jersey, Inc.

Questions

Project Name*
Name of Project

Character Limit: 100

Amount Requested*
Amount Requested- Max. $40,000.

Character Limit: 20

Total Project Cost*
Character Limit: 20

Contact Person*
Name the person directly responsible for implementing the project and his/her title

Character Limit: 150

Contact Person Email*
Character Limit: 100

Organization Background*
If you have not received a grant from Grotta recently, provide the following (in bullets) about your organization:

- year established
- web address
- mission statement
- population and counties served
- priority issues of concern about older adults

If you have received a grant recently, please provide updates about the populations you are serving and current priorities.

Character Limit: 1000

Prior Grotta Funding*
Use bullets to list prior funding by Grotta, year, amounts received, and the status of these efforts such as it has ended, in process, continuing, etc.. If you are new to apply, list N/A.

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Character Limit: 900

Organization Annual Budget*
Character Limit: 20

Anticipated Project Start Date*
Character Limit: 10

Anticipated Project End Date*
Character Limit: 10

Phase of project*
Select one

Choices
Pilot/Start-up
Scaling up or expanding to new markets, new partners, or new enhancements
Other

Problem and Project Summary*
Summarize your project request. Note: This response will be used in an executive summary so it should be worded carefully.

- Describe the older adult population that the program will benefit, the community and other key participants.

- How you are aware of this population's needs, and issues that you will be addressing?

- Briefly describe the program, the overall goal of the program and the short term goal for this one year grant.

- Give reasons you consider this program to be compelling, creative, innovative, collaborative, and critical NOW and what will help it to be successful such as the project champion, partnerships, strong Board or other funders' support, etc.

Character Limit: 1500

Project Plan Model
Please complete the project plan model below. Please summarize the intended objectives, activities, measures for data collection to know if you are achieving your intended objectives and outcomes.:

1. Column 1: Delineate One of your specific Objectives (first column). You will need this information, or a summary of it, as you complete columns 2-4.

2. Column 2: For each objective, identify the list of activities that will occur to accomplish the objective. In the third column,

3. Column 3: list what you hope to achieve related to the activities(i.e. number of people served, changes in behavior, attitude or other indicators), that are relevant to the project.

4. Column 4: list the specific methods and instruments will you use to measure your outcome and reflect on this work.

Specific Objective	Strategies/Activities	Expected Outcomes/Outputs	How Outcomes will be Measured- Methods and instruments you will use to measure

Partners and Collaborators*

List the roles, responsibilities, and activities of partners or collaborators involved in this project. Describe how each partner or collaborator will participate in the development, implementation, and evaluation of the project. (Partners and collaborators include other organizations, participants, governmental agencies, other funders, universities, etc.)

Character Limit: 1400

Challenges*

What challenges do you foresee?

Character Limit: 1000

Sustainability*

Since this is likely to be a one-year grant, indicate your plans for learning from the project and/or continuing it after this year's funding by the Grotta Fund?

Character Limit: 800

Additional Questions and Attachments

Attachments

Project Leadership*
Describe below or attach a resume of the key program leader(s) and/or story of past successes in benefiting older adults.

Character Limit: 800 | File Size Limit: 2 MB

Project Timeline*
Attach or list below using bullet points a complete timeline for your project with key milestones.

File Size Limit: 1 MB

Partners and Collaborators- optional
List below your intent to collaborate with key partners and attach memoranda of understanding or letters of agreement with a partnering organizations.

File Size Limit: 1 MB

Please complete a Budget Form. You can download and complete the form in the following question, OR you can complete the following two budget form tables (Expenses and Revenue). Any questions, please contact Renie Carniol at rcarniol@jfedgmw.org. or Jeanelly Hernandez at jhernandez@jfedgmw.org.

Budget Form 1
Click to open the Budget Form. Complete and attach using the Upload a File button. Justify each line item and note support from other funders and other income sources.

File Size Limit: 2 MB

Budget-Expenses

CATEGORY	TOTAL PROJECT COSTS	GROTTA REQUEST	DESCRIPTION
Salary and Fringes			
Salary and Fringes			

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Other professionals- consultants, etc			
Other professionals- consultants, etc			
Supplies and small equipment			
Marketing			
Evaluation			
Other- please specify			
Other- please specify			
Other- please specify			
Other- please specify			
TOTAL			

Budget- Revenue

Category	Revenue $	Brief Description	Status - Confirmed or Pending
Other Grant Support			
Other Grant Support			

Other Grant Support			
Reimbursement for Program Services			
Organization Resources/In-Kind			
Other- please specify			
Other- please specify			
Other- please specify			
Other- please specify			
TOTAL			

Additional information- Optional

This is space for you to tell us something or attach something about the project that you have not already described. This is optional.

Character Limit: 1000

Please Note: By entering data into the next three (3) fields calling for insertion of your Name, Title, and Date, you are:

(1) representing that you are an officer or other agent for the applicant Grantee duly authorized to enter into legally binding submissions and agreements on behalf of the Grantee

(2) agreeing to submit this grant application in an electronic form on behalf of the Grantee which shall be bound by its contents as an electronic transaction

(3) agreeing that your insertion of data into these following fields constitutes an electronic signature.

Authorized Signature:*

Character Limit: 100

Title*

Character Limit: 100

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Date*
Character Limit: 10