

Please complete your proposal using our online grants management portal (instructions located on the foundation’s website). **This PDF is for informational purposes only and was updated Dec 2018.**

PART 1: INFANTS & FAMILIES CONNECTING PRIORITY CONFIRMATION

Before you begin filling out this proposal, please refer to the Vision, Mission, and Goals of the Bella Vista Foundation – which can be found at www.bellavistafoundation.org – to ensure that the program for which you are requesting funding is aligned with foundation priorities.

PART 1: OVERVIEW INFORMATION

Requested Amount:

Project/Program Title:

Program Summary (one to two sentence summary of your request):

Program Start Date:

Program End Date:

Total Annual Organization Budget:

Total Program Budget:

County:

Age Group Served:

PART 2: NARRATIVE QUESTIONS

1. Please provide a concise description of your **organization** including mission, geographical reach, types of programs/services provided, and total number of people served by the agency. *Please only share organizational updates that have occurred since receiving your Bella Vista Foundation grant last year (i.e. management changes, financial health) If this response has not changed since the last application submitted, please write “no changes”. (250 words or fewer)*
2. Program Context – In this section please provide a narrative description of your program/intervention for low-income pregnant women and parents/ caregivers of children **ages 0 to 3**. Include how the program/intervention helps them to cope with their own stress,

<p>how it helps them nurture and protect their children and how it supports children in the development of healthy social, emotional, and cognitive functioning.</p> <p><i>You will be asked to provide specific details of the activities in your program, including the duration and where they take place, in the Grant Activities & Impact chart found under Part 4, documents to upload, below. (1,200 words or fewer)</i></p>
<p>3. Community Context – In this section please provide a brief overview of the community served by the program for which you are requesting support, including a description of the target population and their specific needs.,</p>

<p>PART 4: DOCUMENTS TO UPLOAD <i>(Please note that all documents must be uploaded as PDFs)</i></p>
<p>1. Financial statement showing actual revenue and expenses for the agency’s most recently completed fiscal year (required)</p>
<p>2. Use the Grant Activities & Impacts Chart to demonstrate how you will measure the program’s impact. You may download the Grant Activities & Impacts Chart from the link on this page and upload it as a PDF when complete. (300 words or fewer)(required)</p>
<p>3. Theory of Change (if your organization has one)</p>
<p>4. Organizational budget for the present year, detailing proposed expenditures and projected sources of funding (required)</p>
<p>5. Program budget detailing all proposed expenditures, and projected sources of funding including foundations, for the program which you are requesting funding. (if applicable)</p>
<p>6. List of board members and their affiliations (required)</p>