**2022 Community Outreach Grant Application Practice Worksheet**

Items marked with an asterisk\* are required.

As an applicant, have you read through the 2022 Community Outreach Grant Criteria prior to submitting an application? \*

**Yes/No**

Is this the first application submitted on behalf of your council or chapter for the 2022 Community Outreach Grant cycle? \*

**Yes/No**

Please enter the dollar amount for which your organization is applying. (up to $5,000.00) \*

List the number of people this program has helped in the past. If this is a new program, simply enter “New Program.” \*

Items marked with an asterisk\* are required.

Thank you for your interest in The MOAA Foundation 2022 Community Outreach grant. Before applying, please agree to the following terms and conditions:

I/we understand submitting a grant application does not guarantee a grant will be awarded.

I/we understand MOAA Foundation grants may only be awarded to MOAA councils or chapters offering programs or services to military or veteran individuals or families in a qualifying service delivery area specified in the grant criteria.

I/we understand our MOAA-affiliated organization will be responsible for the expenditure of all granted funds in accordance with the grant agreement.

I/we understand the individual applying for a MOAA Foundation grant is authorized by the MOAA council or chapter to submit a grant application on the council's or chapter’s behalf.

To the best of my/our knowledge, all statements, assertions, descriptions, and representations made in the grant application are true and accurate.

I/we understand that active council/chapter liability insurance must be purchased and provided to MOAA National if our Council/Chapter is awarded and wishes to receive 2022 Community Outreach Grant funds.

\* Community Outreach Grant Application: I/We agree to these terms and conditions

Note: Free-form sections need not be filled completely. Use only the space needed to completely answer the question. Grant applications are scored based on content, not length.

Grant Application Open: Dec. 1, 2021 to Feb. 28, 2022

\*required field

**Grantee Organization Information**

**MOAA Council or Chapter Name \*:**

**First Name \*:**

**Last Name \*:**

**Applicant Email \*:**

**Alternate Contact Email (if necessary) :**

**Phone Number \*:**

**Alternate Phone Number (if necessary) :**

**Address \*:**

**City \*:**

**State \*:**

**Zip Code \*:**

**1.** Geographical area served (e.g., “Greater Dallas Metro Area” or “Pensacola, Fla.”). \*

(0/300 characters)

**2.** Please briefly describe the unique challenges and/or needs of servicemembers, veterans, or their families within your community. \* (0/1000 characters)

**3. Organization description**

If your council/chapter will be working with another organization/s to use grant funds if awarded, please list the organization/s and their websites (e.g., “Portland USO Center https://northwest.uso.org/portland). If you will not be working with other organizations, simply input “N/A”. \* (0/500 characters)

**4. Organization mission**

Provide your MOAA council or chapter mission statement and the mission statement/s for the organizations you plan to work with to use grant funds (if applicable).

If you do not have one, simply input “N/A”. \* (0/750 characters)

**5.** Is your MOAA council or chapter, or the organization in which you are partnering with, an IRS, section 501, nonprofit organization (e.g., 501(c)(3), 501(c)(19), etc.)? \*

**Yes/No**

**Eligibility**

If you cannot answer “yes” to all of the following questions, your council or chapter is not eligible to receive a grant through this program.

**6.** Do the programs or services requesting assistance through this MOAA Foundation Community Outreach Grant fall under at least one of the 10 areas of critical family need? \*

(Must be a “Yes,” cannot proceed if not) \*

**Yes/No**

**7.** Does your council or chapter deliver MOAA Foundation-funded programs/services directly to those in need or does the council or chapter deliver the funds through a community partnership or collaboration? \*

(Must be a “Yes,” cannot proceed if not)

*Please note, grant funding may not be used as a “pass through” grant to fund non-MOAA organizations in the local community offering programs/services in which the MOAA council/chapter has little or no active role.*

**Yes/No**

**8.** If awarded, will those benefiting from this grant fall under the specifications of “military and veteran families” as described within the Community Outreach Grant Criteria? \*

(Must be a “Yes,” cannot proceed if not)

**Yes/No**

**9.** Before grant funding can be awarded, the grantee must have in place a general liability insurance policy, and an insurance certificate must be sent to the MOAA Foundation. Do you agree? \*

(Must be a “Yes,” cannot proceed if not)

**Yes/No**

Items marked with an asterisk\* are required.

**Program Description**

**10. Project Name and Description**

Provide the name of and a detailed description for the program in which you are seeking funding. (e.g.: Jane Doe’s chapter’s Annual Military Uniform Collection Drive. This program is held every year in the hopes of…”) \* (0/2500 characters)

*Please note, there is a question later in the application asking for specific community partnership involvement information.*

**11. Community Impact**

Why and how is this program important to the community? (50 points) \*

(0/2500 characters)

Items marked with an asterisk\* are required.

**Effectiveness Measurement**

**Military and Veteran Family Peer Engagement**

**12.** How involved will the council/chapter be in the program? (25 points) \*

(0/2500 characters)

**Follow-up**

**13.** What is the potential for positive MOAA brand exposure within the local community from this program? (25 Points) \*

(0/2500 characters)

Items marked with an asterisk\* are required.

**Documents**

**IRS Form 990

Upload the IRS Form 990 of any organization(s) your MOAA Council or Chapter is partnering with for this project. If you have more than three documents, only submit the IRS Form 990 of the primary or lead organization of the collaborative community organization you are working with. \***(Choose File: 10MB limit; PDF preferred)

**Audited Financial Statements**

**If available, submit your MOAA council or chapter’s (or the organization you may be partnering with) audited financial statements for the prior year.**

(Choose File: 10MB limit; PDF preferred)

**Detailed Budget**

**Describe in detail how the grant money will be spent. If part of a larger program budget, describe the portion of that budget to be funded by the grant. Generally, the program budget is a line-item budget in the form of a spreadsheet. \***

(Choose File: 10MB limit; PDF preferred)

**Marketing Materials**

***Optional:* Include any organizational program marketing materials or project marketing materials (scans, website screenshots, printed flyers, social media pages, etcetera).**

(Choose File: 10MB limit; PDF preferred)

**General liability insurance policy certificate**

***Important:* You should be able to obtain a copy of this insurance certificate from your insurance provider. If you do not have a copy yet and wish to submit your grant application, you may do so, but funds will not be transferred until you submit a copy of your insurance policy certificate.**

(Choose File: 10MB limit; PDF preferred)

You are about to submit your final application for a MOAA Foundation 2022 Community Outreach Grant. Once you click **Submit**, you may not make any additional changes. All submissions are final.

If you are NOT ready to submit please click **Save Progress** so you may return the application and submit when ready. You must submit your application by Feb. 28, 2022 11:59PM EST to be considered.